

University of Luton

APRIL 2005

Preface

The Quality Assurance Agency for Higher Education (QAA) exists to safeguard the public interest in sound standards of higher education (HE) qualifications and to encourage continuous improvement in the management of the quality of HE.

To do this QAA carries out reviews of individual HE institutions (universities and colleges of HE). In England and Northern Ireland this process is known as institutional audit. QAA operates similar but separate processes in Scotland and Wales.

The purpose of institutional audit

The aims of institutional audit are to meet the public interest in knowing that universities and colleges are:

- providing HE, awards and qualifications of an acceptable quality and an appropriate academic standard, and
- exercising their legal powers to award degrees in a proper manner.

Judgements

Institutional audit results in judgements about the institutions being reviewed. Judgements are made about:

- the confidence that can reasonably be placed in the soundness of the institution's present and likely future management of the quality of its programmes and the academic standards of its awards
- the reliance that can reasonably be placed on the accuracy, integrity, completeness and frankness of the information that the institution publishes, and about the quality of its programmes and the standards of its awards.

These judgements are expressed as either **broad confidence**, **limited confidence** or **no confidence** and are accompanied by examples of good practice and recommendations for improvement.

Nationally agreed standards

Institutional audit uses a set of nationally agreed reference points, known as the 'Academic Infrastructure', to consider an institution's standards and quality. These are published by QAA and consist of:

- *The framework for higher education qualifications in England, Wales and Northern Ireland (FHEQ)*, which include descriptions of different HE qualifications
- *The Code of practice for the assurance of academic quality and standards in higher education*
- subject benchmark statements, which describe the characteristics of degrees in different subjects
- guidelines for preparing programme specifications, which are descriptions of the what is on offer to students in individual programmes of study. They outline the intended knowledge, skills, understanding and attributes of a student completing that programme. They also give details of teaching and assessment methods and link the programme to the FHEQ.

The audit process

Institutional audits are carried out by teams of academics who review the way in which institutions oversee their academic quality and standards. Because they are evaluating their equals, the process is called 'peer review'.

The main elements of institutional audit are:

- a preliminary visit by QAA to the institution nine months before the audit visit
- a self-evaluation document submitted by the institution four months before the audit visit
- a written submission by the student representative body, if they have chosen to do so, four months before the audit visit
- a detailed briefing visit to the institution by the audit team five weeks before the audit visit
- the audit visit, which lasts five days
- the publication of a report on the audit team's judgements and findings 20 weeks after the audit visit.

The evidence for the audit

In order to obtain the evidence for its judgement, the audit team carries out a number of activities, including:

- reviewing the institution's own internal procedures and documents, such as regulations, policy statements, codes of practice, recruitment publications and minutes of relevant meetings, as well as the self-evaluation document itself
- reviewing the written submission from students
- asking questions of relevant staff
- talking to students about their experiences
- exploring how the institution uses the Academic Infrastructure.

The audit team also gathers evidence by focusing on examples of the institution's internal quality assurance processes at work using 'audit trails'. These trails may focus on a particular programme or programmes offered at that institution, when they are known as a 'discipline audit trail'. In addition, the audit team may focus on a particular theme that runs throughout the institution's management of its standards and quality. This is known as a 'thematic enquiry'.

From 2004, institutions will be required to publish information about the quality and standards of their programmes and awards in a format recommended in document 03/51, *Information on quality and standards in higher education: Final guidance*, published by the Higher Education Funding Council for England. The audit team reviews progress towards meeting this requirement.

ISBN 1 84482 364 4

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Summary

Introduction

A team of auditors from the Quality Assurance Agency for Higher Education (QAA) visited the University of Luton (the University) from 11 to 15 April 2005 to carry out an institutional audit. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the academic standards of its awards.

To arrive at its conclusions the audit team spoke to members of staff throughout the University, to current students, and read a wide range of documents relating to the way the University manages the academic aspects of its provision.

The words 'academic standards' are used to describe the level of achievement that a student has to reach to gain an award (for example, a degree). It should be at a similar level across the UK.

Academic quality is a way of describing how well the learning opportunities available to students help them to achieve their award. It is about making sure that appropriate teaching, support, assessment and learning opportunities are provided for them.

In institutional audit, both academic standards and academic quality are reviewed.

Outcome of the audit

As a result of its investigations, the audit team's view of the University is that:

- limited confidence can be placed in the soundness of the University's current and likely future management of the quality of its academic programmes and the academic standards of its awards.

Features of good practice

The audit team identified the following areas as being good practice:

- the development of Employer Liaison Fellows

- the use of Discipline Support Plans as a useful tool for library liaison with academic departments
- the use of the Library Liaison Group as a forum for liaison between the University library and libraries in the partner Colleges
- the promising work of the Corporate Academic Advisory Service in terms of student support, its contribution to student retention and its development of a central system for extenuating circumstances treatment
- the introduction of Student Attainment Review Boards as a means of supporting students at risk
- the Personal, Professional and Academic Development and the integration of career management into the curriculum.

Recommendations for action

The audit team also recommends that the University should consider further action in a number of areas to ensure that the academic quality and standards of the awards it offers are maintained. It is essential that:

- the method of programme approval ensures that decisions are taken in a timely manner, with clear outcomes, made independently of those responsible for programme management and development, and that they take account of any necessary specialist advice.

The team advises the University to:

- implement the new periodic review procedures without delay and to ensure that the reviews provide systematic coverage of all programmes
- develop consistent, accurate and coherent reporting protocols so that senior committees of the University are able to exercise their responsibility fully
- develop clear formal University-level procedures for the approval of eMBA overseas partners where assessment will be undertaken by the partner.

It would be desirable for the University to:

- reconsider the combination of roles in persons and committees in relation to the operation and oversight of quality assurance and quality enhancement to guard against possible conflicts of interest
- ensure that programme approval procedures are clearly described and communicated to those who are involved with them, so that they are implemented consistently across the University
- consider, especially in the light of a move to more linear provision, whether annual course monitoring should be more focused on individual programmes
- consider whether its student progression rules are fully compatible with the achievement of learning outcomes and to continue to monitor student performance in this context
- improve student participation in programme evaluation procedures to enhance local academic practice.

Discipline audit trails

The audit team also looked at academic provision in four discipline areas: computing, graphic design, languages and communication, and sports science to find out how well the University's systems and procedures were working at discipline level. The University provided the team with documents, including student work and, here too, the team spoke to staff and students. The team came to the view that, in the main, the standard of student achievement in the programmes was appropriate to the titles of the awards and their place within *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), published by QAA. The team also considered that the quality of learning opportunities available to students in each programme was suitable for a programme of study leading to the awards.

National reference points

To provide further evidence to support its findings the audit team also investigated the use made by the University of the Academic Infrastructure which QAA has developed on behalf of the whole of UK higher education. The Academic Infrastructure is a set of nationally agreed reference points that help to define both good practice and academic standards. The findings of the audit suggest that the University has responded appropriately in the main to the *Code of practice for the assurance of academic standards in higher education*, the FHEQ, subject benchmark statements and programme specifications.

The audit process includes a check on the reliability of information about academic standards and quality published by institutions in a standard format, in line with the Higher Education Funding Council for England requirements for *Information on quality and standards in higher education: Final guidance* (HEFCE 03/51). At the time of the audit, the University was making progress towards fulfilling its responsibilities in this area. The information it was publishing about the quality of its programmes and the standards of its awards was found to be reliable.

Main report

Main report

1 An institutional audit of the University of Luton (the University) was undertaken during the week commencing 11 April 2005. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the discharge of its responsibility for its awards.

2 The audit was carried out using a process developed by the Quality Assurance Agency for Higher Education (QAA) in partnership with the Higher Education Funding Council for England (HEFCE), the Standing Conference of Principals (SCOP) and Universities UK (UUK), and has been endorsed by the Department for Education and Skills. For institutions in England, it replaces the previous processes of continuation audit, undertaken by QAA at the request of UUK and SCOP, and universal subject review, undertaken by QAA on behalf of HEFCE, as part of the latter's statutory responsibility for assessing the quality of education that it funds.

3 The audit checked the effectiveness of the University's procedures for establishing and maintaining the standards of its academic awards; for reviewing and enhancing the quality of the programmes of study leading to those awards; and for publishing reliable information. As part of the audit process, according to protocols agreed with HEFCE, SCOP and UUK, the audit included consideration of an example of institutional processes at work at the level of the programme, through discipline audit trails (DATs), together with examples of those processes operating at the level of the institution as a whole. The scope of the audit encompassed all of the University's provision and collaborative arrangements leading to its awards.

Section 1: Introduction: the University of Luton

The institution and its mission

4 The University was established in July 1993 by designation of the Privy Council. Formerly, it was the Luton College of Higher Education, created in 1976 by the

amalgamation of Putteridge Bury College of Education, a teacher training centre founded in 1966 on the rural outskirts of Luton, and Luton College of Technology, founded in 1958 but tracing its history back through the Luton Technical Institute from 1937 and the Luton Modern School from 1908. Teaching and administrative activities in central Luton are concentrated on the Park Square campus, which is also where the Vice-Chancellor and the senior management are located. The University has retained the Putteridge Bury campus as its centre for postgraduate and post-experience courses, and for its work with employers. Its healthcare education is delivered on four hospital sites at Aylesbury, High Wycombe, Bedford, and Luton and Dunstable.

5 According to headcount statistics provided by the University, the total student population in 2004-05 is 12,483, of which 8,908 (71 per cent) are full-time and 3,567 (29 per cent) part-time, with the remaining eight students on sandwich programmes; 13 per cent of the University's students are postgraduates. The University is currently in a period of stability in respect of numbers of staff and students, following a period where numbers of students and staff declined.

6 Since September 2004, the University has been structurally divided into three faculties: Creative Arts, Technologies and Science; Health and Social Sciences; and Luton Business School. The largest of these is the Luton Business School, which in 2004-05 has 44 per cent of the student population. The faculties are further divided into departments (or disciplines in healthcare). Departments with small numbers of students are designated as divisions. Where relevant, this report will use 'department' to include schools, disciplines, divisions and departments. Departments have responsibility for one or more fields which are defined in the self-evaluation document (SED) as subject areas containing related modules.

7 In the SED the University explained that it is proud of its diverse multicultural and multinational student body, and sees itself as a teaching-intensive institution, committed to access and widening participation, with an

emphasis on career-related vocational programmes. A new Vice-Chancellor took up his appointment in September 2003 and has set student recruitment and student retention as two priority corporate objectives for the University, with the aim of arresting the decline in the numbers of home full-time students. As a consequence, structural changes were made to the undergraduate curriculum during 2003-04 with programmes redesigned on a more linear basis, with limitations on student choice (see below, paragraph 27).

8 The University's mission is as follows:

'The University of Luton is determined to establish an excellent reputation for high quality and vocational distinctiveness, and is committed to:

- providing innovative opportunities to participate in higher education for all those able to benefit
- a strong regional presence, consistent with the lifelong learning needs of individuals, groups and employers within a socially diverse community
- helping all its students and staff to attain their full potential'.

Collaborative provision

9 The amount of the University's collaborative provision has increased significantly since the 2001 continuation audit, predominantly through Foundation Degrees (FDs) delivered in four further education (FE) colleges. Validation relationships have also been developed with seven specialist national providers, and articulation arrangements have been established with three overseas providers including one consortium of universities/institutes. In addition, one overseas college has been given the status of an associate college (see below, paragraph 135). More recently, the University has entered into a partnership with Cranfield and Hertfordshire Universities and the Bedfordshire and Hertfordshire Strategic Health Authority (SHA) for the establishment of a postgraduate medical school.

Background information

10 The published information available for this audit included:

- the information on the University's website
- the report of the previous QAA quality audit of the University, published in May 2002 (referred to as the 2002 audit report for the remainder of this document)
- the QAA reports on three developmental engagements
- the reports of HEFCE and QAA reviews of provision at subject level.

11 The University provided QAA with the following documents:

- the SED
- discipline self-evaluation documents (DSEDs) for the four areas selected for DATs
- the 2005 undergraduate prospectus
- the 2005 postgraduate prospectus
- the academic calendar 2004-05
- 'thexperience' - the magazine for the University of Luton, No1/Spring 2004.

12 The audit team was given ready access to the University's internal documents in hardcopy or on the University website and intranet and to a range of documentation relating to the selected DATs, the latter including examples of student work.

The audit process

13 A preliminary meeting was held at the University in June 2004. From the information made available by the University, QAA determined that four DATs would be conducted during the audit visit. QAA received the SED and supporting documentation in November 2004. From this information the audit team selected DATs in computing, graphic design, languages and communication, and sports science. The DSEDs, including programme specifications, were received in February 2005.

14 The audit team visited the University from 23 to 25 February 2005 for the purpose of exploring with the Vice-Chancellor, senior members of staff and student representatives matters relating to the management of quality and standards raised by the SED or other documentation provided for the team. During this briefing visit, the team signalled a number of themes for the audit and developed a programme of meetings for the audit visit, which was agreed with the University.

15 At the preliminary meeting, the students of the University were invited, through their Students' Union (ULSU), to submit a separate document expressing views on the student experience at the University and identifying any matters of concern or commendation with respect to the quality of programmes and the standards of awards. They were also invited to give their views on the level of representation afforded to them and on the extent to which their views were taken into account.

16 In December 2004, the ULSU submitted to QAA a students' written submission (SWS) based on the views drawn from a range of sources including a student satisfaction questionnaire, student focus groups, student representatives and documentation from a range of University committees at various levels. ULSU indicated that the SWS had been shared with appropriate University staff. There were no matters that the audit team was required to treat with any level of confidentiality greater than that normally applying to the audit process. The team is grateful to the students for preparing this document to support the audit.

17 The audit visit took place from 11 to 15 April 2005 and involved further meetings with staff and students of the University, both at institutional level and in relation to the selected DATs. The audit team was Dr B Erwin, Professor V Gore, Ms J Rice, Dr C Rivlin, Dr S Ryrie, auditors, and Dr M Gilmore, audit secretary. The audit was coordinated for QAA by Mrs E Harries Jenkins, Assistant Director, Reviews Group.

Developments since the previous academic quality audit

18 The previous quality audit was undertaken in March 2001 and the report was published by QAA in May 2002. The audit report stated that 'the general confidence which could otherwise be placed in the University's management of standards would have to be qualified in the absence of further consideration and action on the part of the University' in relation to 'the identified weaknesses in the administration of formal examinations'. It commended the University on:

- the effective management of its initiatives in widening participation in higher education (HE), in particular through its pioneering approach to work-based learning
- its responsible and professional approach to collaborative arrangements
- its imaginative, responsible and professional approach to the recruitment and supervision of postgraduate research students
- its initiative in exposing its examination procedures to the scrutiny of an independent examination auditor.

19 It suggested that the University consider the necessity of:

- reviewing its procedures for responding to the reports of the examinations auditor so as to ensure that any concerns raised are fully and satisfactorily addressed.

20 It also suggested considering the advisability of:

- improving the coordination of existing mechanisms for securing student feedback, taking steps to improve response rates, and ensuring that any remedial action taken is timely in execution and effectively communicated to students
- continuing to improve the University's management information system and its administration so that the complex requirement of the University's repositioning strategy are fully supported

- ensuring that all external examiners are fully committed to the decisions of Boards of Examiners prior to signing their confirmation to these decisions
- ensuring that the educational and learning resource support systems and structures available to an increasingly diverse student cohort, with particular reference to increasing numbers of international, research and part-time students, are adequate for their purpose.

21 And further, the desirability of:

- securing a higher level of consistency in tutorial support and availability, and in the return of assessed work.

22 The SED for the present institutional audit included the University's formal response to the 2001 audit. The SED explained that, in relation to the point of necessity, 'the University decided in 2003 to disestablish the role of Examinations Auditor' as the 'value of the auditors' reports had diminished as the procedures for examinations had become more firmly embedded in the working practices of the University'. The SED went on to state that the view of the University was that examination 'procedures were rigorous and were being implemented with integrity and appropriate sensitivity, and that an appointment to the role was no longer justified'.

23 In considering the University's response, the audit team noted the references in the continuation audit report that supported the recommendation. The previous team had both commended the University for the appointment of an examinations auditor, but had also raised some questions about the way in which the points raised by the auditor had been addressed and followed up. The present team concluded that the University had responded to the point of necessity in that the post of examinations auditor no longer exists, but in its response in the SED had not fully reflected on the underlying concerns relating to structural communication as detailed in the 2002 audit report.

24 The audit team noted that the University has addressed points of advisability and desirability by the following:

- the improvement of activities related to student feedback has been approached through a number of methods outlined in the SED including the introduction of a Student Experience Questionnaire (SEQ) (collecting both quantitative and qualitative data) in addition to the existing Student Perception of Module (SPOM) survey; the introduction of model agendas for field/course committees with a standing item on student feedback; the publication of student survey outcomes on the virtual learning environment (VLE); the appointment of a Dean of Students; the establishment of a student representative committee; the consideration by Academic Board of student complaints; and the establishment of more secure procedures for appointing and briefing student representatives
- the improvement in student data is being taken forward by a process review led by the Registry and the recent installation of a new student record system
- the University has clarified the documentary guidance given to external examiners about the distinction between their contribution to the debate about academic standards and their subscription to the decision of boards of examiners, and provides regular training to internal members of boards of examiners about the roles of all participants at examination boards
- a range of student support systems and structures have been put in place including a series of Personal Development Planning (PDP) modules within the undergraduate curriculum
- tutorial support is made available to students through a variety of mechanisms including a Corporate Academic Advisory Service (CAAS).

25 The audit team saw evidence that, in general, the University had either addressed, or was addressing the 'points for consideration' in the 2002 report in a timely and appropriate manner. The effectiveness of the actions taken is discussed more fully in subsequent sections of this report.

26 The University has also participated in three QAA developmental engagements between 2002 and 2004 in Business and Management, Law, and Social Policy and Administration of Social Work. The SED described the University's response to the findings of the development engagements, noting that: where highlighted, documentation had been amended; feedback from and to students and support for students had been strengthened; and that the new cycle of periodic review would begin in 2005-06 (see paragraph 57). The audit team noted that the timeliness of the return of student work, identified in the 2002 audit report, was raised again as an issue in one of the developmental engagements. There was some evidence during the audit visit that this issue has not been addressed uniformly across all subjects (see below, paragraph 123).

Section 2: The audit investigations: institutional processes

The institution's view as expressed in the SED

27 While making reference to the setting and maintenance of standards, the SED placed its main emphasis upon teaching quality, the student experience and a quality enhancement agenda. As is the case with the SED as a whole, there was a clear strategic context and purpose evident. A 'renewed focus on individual students', for example, is linked to structural changes in the curriculum, where the University has consciously moved away from its complex modular credit scheme to a more simple and linear structure, with less student choice. The SED explained that the 'guiding purpose of these changes' was to 're-establish the programme and the department, instead of an anonymous modular structure, as the student's point of engagement with the University and its curriculum'.

28 In its SED the University stated that this change was related to the immediate strategic priorities set out by the new Vice-Chancellor for

improved student recruitment and retention, and overtly acknowledges the pressures arising from a significant contraction in student applications and numbers, and a corresponding need, to simplify, reshape and refocus academic and administrative structures for greater efficiency and effectiveness. The SED went on to describe how corporate management has been de-layered, and two new senior positions have been created, that of Dean of Students and Dean of Partnerships, as part of the University's determination to improve the quality of service to students, building on its good reputation for teaching quality, as attested by external subject review and league tables. In its SED the University provided clear examples of how it has developed a range of mechanisms to support its student body including most recently the CAAS, the Student Attainment Review (STAR) boards, and Personal, Professional and Academic Development (PPAD) modules.

29 In its SED the University explained that the 'changes to the framework for managing quality and standards were made for a number of reasons, occasioned by the appointment of a new Vice Chancellor but prompted by the need to reassess priorities in the light of the declining numbers of home applicants, sub-optimal rates of student progression, increased collaborative activity, and a curriculum which, with its emphasis on student choice, could not be sustained at the level of resource available to the University'. The effect of the changes, the SED stated, 'has been to maintain the fundamental quality assurance framework while compressing activities into a more economical committee and executive operation'. The University stated that it now 'has as few committees as are needed' and that its central academic executive bodies provide 'strong leadership' and 'drive through' the implementation of policy.

30 The audit team appreciated the honesty and powerful clarity of the SED in setting out the strategic context and the imperatives and purpose behind changes in the quality strategy and framework.

The institution's framework for managing quality and standards, including collaborative provision

31 As indicated above, compelling strategic imperatives have strongly shaped the most recent development of the University's arrangements for managing quality and standards. The last two years have seen a considerable number of changes at the University as it reaffirmed its access mission, refocused, and sought to stabilise falling student numbers. The SED stated that increased efficiency 'has enabled resources to be released for investment in student recruitment, retention, quality enhancement, the introduction of the new student records system, and collaborative provision'.

32 Described by the University as a symbol of this change was the replacement of the former Academic Standards Committee and Teaching and Learning Committee with a single committee, entitled Teaching Quality and Standards Committee (TQSC). The SED stated that 'TQSC links responsibility for the quality and standards of taught programmes to the enhancement of teaching quality'. The SED explained that 'the aims of the change are to ensure that the outcomes of the quality assurance process are used more explicitly to inform quality enhancement'.

33 TQSC reports upwards to Academic Board and its remit is mirrored in the faculty committee structure by faculty TQSCs (FTQSCs) implemented at the same time as TQSC, which report to TQSC and have common terms of reference. The Academic Board was described in the SED as the senior academic body of the University, responsible for academic planning, the monitoring and implementation of 'corporate academic policy' and 'setting standards'. There are in addition three faculty boards, a Research Committee and a Research Degrees Committee. The SED explained that primary responsibility for the quality of the University's academic provision 'resides in staff teams, constituted as field, programme or course committees'. Such committees are formally accountable to the faculty boards, which are accountable to Academic Board.

34 The SED explained that this is a committee structure which the University sees as characterised by 'short lines of accountability to Academic Board' and one where the 'central academic executive bodies' play a 'strong leadership' role and 'drive through' implementation. A 'locus of responsibility' lies with the Centre for Quality Assurance and Enhancement (CQAE), managed by the Dean of Quality Assurance, who also chairs TQSC. The CQAE, like TQSC itself, is expected to combine more than one role, including quality assurance and management, a responsibility for teaching quality enhancement, and for the development of the undergraduate and postgraduate modular schemes. It also has an advisory, regulatory and executive role in the new programme validation system (see below, paragraph 44).

35 The audit team noted that the resources available to the CQAE to carry out these responsibilities might be seen as relatively limited and the team saw evidence suggesting that resources had diminished at a time when important changes to the quality framework have been introduced, increasing the demands placed on the Centre. In light of the recent changes both to the quality framework, and to the committee structure, the team also had reservations about the desirability of the head of such a centre acting as chair of TQSC. There was no evidence to suggest that the current incumbent was unable to fulfil these roles, even when, as recently, they were also combined with the post of Dean of Students. Rather, there now seems to be the possibility for a potential conflict of interest in the context of the role of CQAE changing from regulatory to embrace facilitation, and development. The team concluded that it was desirable therefore that the University reconsider the combination of roles in persons and committees in relation to the operation and oversight of quality assurance and quality enhancement to guard against possible conflicts of interest.

36 The audit team considered the papers relating to TQSC and was able to confirm that its prime focus, as intended, was teaching quality and quality enhancement. The agendas

for TQSC confirm that relevant aspects of academic standards are considered by the Committee, but the team noted that in the minutes the main areas for discussion and debate related to enhancement matters which reflected the University's strategic development needs, including the renewal and expansion of the academic portfolio. The priority being given to enhancement matters was also reflected in discussions between staff and the team. From the evidence available to it, the team formed the view that in relation to the changes in, and the effectiveness of, the validation system (see below, paragraph 48) and the lack of rigour of the overview exercised by TQSC in relation to collaborative provision, (see below, paragraph 141) the role of TQSC in relation to the management of the standards of awards was not receiving sufficient attention.

37 The audit team concluded that in terms of TQSC, the combination of standards and enhancement in one central committee ran the risk of a loss of focus concerning the setting and maintenance of academic standards. This was particularly in light of an ambitious, rapid and corporately led development agenda embracing collaborative provision, together with a strong institutional steer for greater responsiveness, efficiency and enhancement. The team was concerned that this was a risk of which the University, at all levels, seemed to be unaware.

The institution's intentions for the enhancement of quality and standards

38 As noted above the University places significant emphasis on quality enhancement. The University has recently adopted an 'enhancement driven-programme development and approval process' and has developed two roles with briefs that include enhancement: the Head of Teaching Quality Enhancement, who leads the development of the undergraduate and postgraduate modular schemes, and the Sub-Deans (Quality Enhancement) of the faculties.

39 The SED explained that a consolidated quality enhancement agenda would be grounded more explicitly in the University's access and employability mission and its

emerging involvement in distributed provision. The SED also described how the University, through its quality enhancement agenda, is giving priority to activities supporting improved student retention which involve 're-establishing the programme and department, instead of an anonymous modular structure, as the student's point of engagement' and strengthening institutional student support. The SED went on to state that the University is 'currently in a transitional phase of implementation'.

40 The University indicated that the wider quality enhancement agenda will be informed by the corporate Teaching, Learning and Assessment Strategy, currently being revised with the intention of widening participation which may result in up to 20 per cent of students being taught off campus and increasing the proportion of taught postgraduate and international students. The SED explained that prominence will be given to the following themes: the opportunities that exist for introducing blended learning, student employability, assessment, the professional teaching environment, internationalising the curriculum, and the configuration of the estate. The SED described two University bids for Centres of Excellence in Teaching and Learning (CETL) and other current quality enhancement initiatives.

41 The audit team recognised the potential value of the initiatives to enhance student learning and support which the University is undertaking, particularly in the area of student PDP. It was also noted that what was understood to be an enhancement driven model of programme approval reflects the strategic initiatives identified in the University's development plan. However, the team heard at various points in its discussion with University staff, with so many initiatives underway, there was some ambiguity in the understanding of the difference between the enhancement agenda and the expansion/renewal of the programme portfolio. The team took the view that this potential overlap and ambiguity might mean the University losing some opportunities for enhancement in the more established sense of academic quality or the student learning experience.

Internal approval, monitoring and review processes

Programme approval

42 The University stated that its approval, monitoring and review processes have evolved in response to changing internal needs and external expectations. The first consideration cited by the University for the change was a need for greater economy while maintaining and enhancing quality and securing standards. The second, was the context of less direct engagement from QAA, the third, the importance of adding significant value to the educational process, linked to a process of critical academic reflection and development. The University's Quality Assurance Handbook summarises the new procedure as one which 'dispenses with the adversarial model of validation in favour of a collaborative approach designed to facilitate good course design and academic ownership on the part of the staff team; draws on the concept of academic risk to determine the procedures appropriate to individual proposals; and reaffirms the important place in the quality assurance system of annual programme monitoring and subject review as occasions when staff teams are accountable to the academic community for enhancing the quality and standards of the programmes for which they are responsible'. The Quality Assurance Handbook goes on to say that 'the process continued to be founded on the principles of external peer review'. The SED described how the University has moved to what it calls a 'discretionary approach', one based on proportionality and distinguished by a number of new elements. These include a clarification of requirements and an intended reduction in the volume of documentation; the opportunity to engage an external consultant, which it is envisaged will be used in course development of new programmes in subjects or at levels in which the University has limited previous experience; and the approval of programmes on a grouped basis.

43 The University explained that the method of agreeing the new process started with a paper proposing changes being discussed by Academic Board in June 2003. The process

described in that paper was considered to be too complex and the University later explained that a further paper describing the enhancement-led model was put to Academic Board in December 2003. The audit team had access to the papers that were submitted to Academic Board in December 2003 but was not aware of one providing the details of the new process, nor was there mention of such a paper in the minutes. In January 2004 a document was issued by CQAE which provided the details of the changes to the process of approval, but the paper making the case for the new process and seeking Academic Board approval was not seen by Academic Board until April 2004. The team found that the process described in the 2005 edition of the Quality Assurance Handbook, issued in February 2005, provides a further description which is not in line with either the CQAE document nor the paper that had been agreed by Academic Board. The team found the policy documentation about the new system to be complex and difficult to follow, noting that communication of the requirements of the new system might be also difficult. The team considers it desirable that the University ensure that programme approval procedures are clearly described and communicated to those who are involved with them, so that they are implemented consistently across the University.

44 The change in the approval and validation system had been introduced midway through the academic year in which it was first applied, in a year when the volume of approvals was double that of the highest in any previous year within the last eight years. The process as implemented places emphasis on an 'enhancement-driven process' which is commensurate with 'academic need taking account of academic risk to the University'. The approval process allows for a proposal for a new programme to follow two pathways and the exact procedure to be followed, in individual cases, is determined at a planning meeting involving representatives of the staff team proposing the programme, including the head of department, the chair of the FTQSC (the faculty sub-dean (quality enhancement)) and

staff of the CQAE. The decision about the level of scrutiny for the proposal is based on consideration of agreed criteria set out by TQSC. These include the staff team's experience of delivering programmes at the academic level being proposed and in the academic discipline, and the scale of the proposal. The outcome of the planning meeting is usually a decision either that the proposal can proceed for approval by TQSC or that the proposal requires further development by means of a course development meeting. In discussions with the audit team about the new arrangements staff used the term 'light touch' and they also described CQAE as taking 'executive action' as a result of the planning meeting. The team noted that the planning meeting could decide when a proposal could move directly from development stage to validated status, without passing through any form of further scrutiny or approval process.

45 The audit team's concerns were illustrated by the validation of 30 FDs, an award with distinctive requirements and an emphasis on involvement of employers, which were validated by this new method. The majority of these awards are designed for delivery by partner colleges with support from the University. The process was conducted in a very compressed timescale, with the planning for some of the awards commencing in February 2004, the new approval system approved by the Academic Board in the April 2004, and the approval and validation completed for commencement of the programmes in the following autumn (2004). The team saw evidence that time constraints had had an impact on limiting the time available for the development of the FDs. The team found that the approvals were grouped and the consolidated reports were minimalist which made it difficult to identify individual programmes.

46 In particular the audit team noted that there was a significant lack of independent external input in the process, including the planning meeting, and virtually no involvement from peers external to the University in the process adopted. The team also saw little evidence of involvement of employers, college partners or their staff. In the view of the team,

the inclusion of a member of CQAE in the planning meeting does not constitute sufficient externality in view of the way in which the process operated for the approval of these FDs or in respect of the University's own statement that the 'process continues to be founded on the principles of external peer review'. The section of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice), Section 7: Programme approval, monitoring and review*, published by QAA suggests that 'approval and review of programmes involves appropriate persons who are external to the design and delivery of the programme'; and 'the final decision to approve a programme should be taken by the academic authority, or a body acting on its behalf. The body should be independent of the academic department, or other unit that will offer the programme, and have access to any necessary specialist advice.' In addition, the *Foundation Degree qualification benchmark* states that 'it is important that employers are fully involved in the design and regular review of Foundation Degree programmes'. In the view of the team these expectations were not met.

47 According to the University, the majority of the FDs were conversions of existing HNDs, with established FE partners and, therefore did not require input from individuals external to the University. Six FDs, in areas where previously there had been no provision and where the University lacked subject expertise, did involve external consultation either to support the course team in the framing of the curriculum or by commenting on a draft curriculum, although the audit team was told that it had not always proved possible to gain their attendance at an event.

48 Under the revised approval process Academic Board continues to retain the authority for the approval of programmes of study, the approval to be discharged on its behalf by TQSC. According to the official minutes of the first meeting of TQSC in 2004-05 (October 2004) it was 'noted' that 23 programmes, including 13 master's degrees had been approved since the last meeting. At

the same meeting the committee received a report which listed a further 35 FDs as 'approved' for a start date of September 2004. The audit team learnt from a report considered at the next meeting that 63 programmes were approved during 2003-04 using the new method. The team concluded that programmes had started running prior to formal approval by TQSC, and that TQSC's responsibility for the formal approval process had, in effect, been delegated to the planning meetings.

49 Overall the audit team noted that the speed at which the new system had been introduced, the large volume of approvals, the pressures and limited resources within some faculty subject teams and centrally in CQAE, and the truncated timescales involved, had created in 2004 a situation in which it might have been difficult to adhere fully to the objectives and requirements of the new approval system or indeed those expected more widely within the sector. Having reviewed carefully all the evidence available to it, the team believes that standards may have been put at risk during this process.

50 The audit team also found examples more generally in the operation of the approval system where the setting of conditions was minimal or unclear. This could be through the absence or inconsistent application of reporting conventions, but it appeared to the team that it had resulted in courses being approved within a few weeks of the intended start date and to commencing while there are still unresolved resource or benchmarking issues, their resolution being confirmed retrospectively. The team saw evidence of programmes commencing with fundamental matters concerning the delivery of the award still outstanding, and of approval taking place after students had been enrolled.

51 The audit team considered that the system blurs not only the distinction between development and validation but also that between executive decision making and a self-critical, independent scrutiny of quality and standards. The effectiveness of the latter requires a more rigorous separation of executive powers and deliberative processes.

52 The audit team therefore concluded that it was essential that the method of programme approval ensures that decisions are taken in a timely manner, with clear outcomes, made independently of those responsible for programme management and development, and that they take account of any necessary specialist advice.

53 The University uses comparative level descriptors to ensure that programmes are aligned with *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ), although these are not included in programme specifications. The SED stated that alignment is tested at approval events and through annual monitoring, however, the audit team saw no evidence that this is done consistently and therefore questions whether the University can be certain that all programmes align with the FHEQ.

Annual monitoring

54 The University stated that annual monitoring has become more important as changes have taken place elsewhere in the quality assurance framework, most notably concerning validation. It described how developments in the annual monitoring process have been influenced by a number of factors that include advice from QAA developmental engagement teams, the move to a smaller number of larger departments, a potential for local divergence as a consequence of the University's adoption of more linear programmes (and hence a need for central monitoring), and a desire to see the process add value for staff and serve the needs of enhancement.

55 To secure these objectives the University has introduced a number of changes. These include the involvement of senior CQAE staff in the annual programme monitoring meetings, described as symbolising the increased significance of the process; separation of the annual monitoring cycles for undergraduate field and taught postgraduate programme, allowing for their differential end timing; the addition of a module review form on a discretionary basis (since 2003-04); and from 2004-05 'reports will be presented to FTQSCs

in small groups of cognate field or course' 'to promote discussion about good practice'. In addition to annual monitoring at the field/course level, annual reports are also prepared on the operation of the two modular schemes, Undergraduate and Postgraduate, the reports considered by TQSC and reported, with action plans, to Academic Board.

56 The audit team, however, found little evidence to confirm the increased significance attached by the University to annual monitoring. Monitoring appeared to be still focused at field level, and the team found it difficult to discern within the documentation provided how annual monitoring worked at the level of the individual programme. The grouping device, as applied to annual monitoring reports (AMRs) in parallel to changes affecting validation, might serve to obscure a particular programme in this respect. The team concluded it desirable that, as the University puts greater importance upon annual monitoring and further develops its systems, it should consider, especially in the light of a move to more linear provision, whether annual course monitoring should be more focused on individual programmes.

Periodic review

57 The first cycle of the periodic review process introduced in 1998-99, came to an end in 2003-04. At the time of the audit Academic Board had decided that the next cycle of academic reviews should have a subject rather than departmental focus, would commence in 2005-06, and had agreed a schedule. However, further details of the new system were not available at the time of the audit and the audit team was concerned that the previous process had been allowed to finish its cycle before a consideration of a replacement process. The team noted that some individual programmes, identified through the DATs, appeared not to have been subject to recent formal internal review, some for a period as long as nine years. The University responded that these programmes may not have been subject to individual scrutiny but would have been covered by other internal or external engagements with

the relevant department, such as programme approval. The team considered that this approach did not provide the University with assurance that the programmes were continuing to meet its requirements.

58 The audit team noted that the University had moved increasingly to combine different quality assurance functions in one event, so that, for example, validation and review were combined. In several instances where combined events had taken place, the team could not determine from the resultant reports whether an individual programme had been covered or not. It was unclear how the University tracked its provision and how it assured itself that its periodic review system was comprehensive and functioning effectively. It was also unclear how the University satisfied itself about the effectiveness of particular aspects of its quality assurance system when combined events, compounded by shortcomings in the reporting process, create difficulties in providing an overview of the process in action. The team noted that the previous audit report had commented on the approach and had suggested that it could make a positive contribution to the review process, but that it was too early to make a definitive comment. The present team would agree that the approach has the capacity to make a positive contribution but that the problems identified by the team mean that the reviews are not as effective as they could be.

59 The present position, with an apparent lack of detailed plans and unresolved questions about individual named programmes, leads the audit team to conclude that it is advisable for the University to implement the new periodic review system without delay and in doing so that it should ensure that the reviews provide systematic coverage of all programmes.

External participation in internal review processes

60 The University identified, as a longstanding 'principal feature' of its quality strategy, external calibration through peers and

through benchmarking, an aspect that it described as 'an integral feature of curriculum design, programme validation and the setting of standards'. It also stated that it remains committed to the principle and practice of peer group review. Research degree candidates normally have an external member of the supervisory team and appointments at professorial, reader and senior positions involve the taking of external advice. The University also cited its use of external examiners as evidence of externality. As noted earlier, however, in some areas the extent of external peer involvement appears to have diminished in scale and changed in form during recent years.

61 Periodic review, the audit team judged, has been neither comprehensive nor systematic, has been sometimes combined with validation or other functions and is currently not being operated. In these circumstances the team is unable to conclude that externality in periodic review is 'strong and scrupulous' as the evidence is not available for it to do so, although it recognises that the University has involved externals in the past and understands that it intends to address the matter for the future.

External examiners and their reports

62 The University requires at least one external examiner to be appointed for each programme leading to an award of the University, with separate external examiners appointed for undergraduate and taught postgraduate programmes. The procedures and criteria relating to the appointment of external examiners are outlined clearly in the Quality Assurance Handbook and applied consistently to programmes delivered within the University and at partner colleges. Nominations for appointments are made by staff responsible for the delivery of the programme concerned, and are confirmed by the Dean of the relevant faculty, after which the CQAE scrutinises the nomination again against criteria determined by Academic Board. Lists of approved external examiners are submitted to the TQSC for ratification.

63 The University provides a briefing pack for newly appointed external examiners,

containing essential information about the University and its academic regulations. The Quality Assurance Handbook contains useful guidance for external examiners on their role. The University has held annual meetings for all external examiners at which they are briefed on developments in the University's policies and practices. The SED indicated that the University is currently considering how best to manage the future induction of new external examiners.

64 The University specifies the format and content of external examiners' annual reports by means of a template that the audit team found to be detailed and comprehensive. External examiners are required to comment on the implementation of assessment policy and on the appropriateness of assessment methods adopted and on the standards set for the awards as well as on the standards of student achievement.

65 The external examiners' report form indicates that the reports are required to be submitted to the Vice Chancellor by a specified date in each year. The dean of each faculty is required to respond annually to issues raised and recommendations made in these reports.

66 A summary review of undergraduate external examiners' reports is prepared each year for consideration by the TQSC, and a similar review is prepared for postgraduate external examiners' reports. The audit team found that these reviews provided thoughtful and carefully prepared analyses of key points, along with an appropriate action plan for the following year. The outlining of the responsibilities for the execution of the action plan and a review of the completion of the action plan from the previous year within the most recent summary report for undergraduate programmes, was considered particularly helpful and the team noted that the University intends to do the same for postgraduate provision.

67 The University's annual monitoring process requires each field to comment, in its AMR, on issues raised by external examiners, and to detail actions planned in response. The audit team found evidence that AMRs had been suitably informed by external examiners'

reports, and that subsequent action plans were appropriate and were followed through.

68 The audit team formed the view that the arrangements for external examining operate as intended, and are suitably aligned with the precepts of the *Code of practice, Section 4: External examining*. Responses to external examiners' reports are generally appropriate and to the point. However, the process of consideration of issues relating to standards raised by external examiners is not always formalised. For instance, the team saw evidence that an external examiner's concern over the appropriateness of marks awarded to high-achieving students was addressed only by means of an informal meeting of the course team. The team formed the view that this issue, which potentially afforded an opportunity for securing quality and standards, would have been more appropriately addressed through formal processes at either faculty or institutional levels.

69 It was clear to the audit team, from the DATs, that external examiners believe that assessment policies are appropriate and are observed, and that the standards set for the University's awards are comparable with those of similar subjects in other UK institutions.

70 The audit team confirmed that the University's procedures for making use of the services of its external examiners make a positive contribution to the assurance of quality and standards within the University.

External reference points

71 The University believes that its regulations and procedures embody the precepts of the *Code of practice*, the FHEQ and subject benchmark statements. Its view is that the alignment of programmes with the FHEQ and subject benchmark statements is respectively ensured by its procedures for programme approval, as adopted by the TQSC, and by reviews carried out by Field Boards.

72 The University's Quality Assurance Handbook includes Southern England Consortium for Credit Accumulation and Transfer guidance on academic credit and level descriptors, which are in turn incorporated into

the University's Academic Regulations. The University's Comparative Level Descriptors provide useful guidelines for setting expected levels of student achievement at Levels 1, 2, 3 and M, and the audit team found that these Descriptors were appropriately aligned with the precepts of the FHEQ. However, the team found little evidence as to how the University could be sure that the alignment between descriptors and the learning outcomes of individual programmes is confirmed at approval events.

73 The audit team learnt that during 2003-04 the University decided to permit undergraduate students at levels 1 and 2, who had passed six out of the eight modules they had attempted, to progress to the next academic level. Progression would be automatic (except where professional statutory body (PSB) requirements had not been met) and students would not be required to retrieve the failed modules but would automatically be awarded general academic credit. Under these circumstances a student whose performance had not met the level descriptors or learning outcomes could nevertheless progress to the next level of the programme. Consequently, the team believes it desirable for the University to consider whether its student progression rules could encourage students who are not yet competent to progress to the next level, and to continue to monitor student performance in this context.

74 The audit team observed a high degree of awareness of the existence and purpose of subject benchmark statements on the part of teaching staff. However, the extent to which programme and curriculum design had been informed by the statements appeared to be patchy. Programme specifications frequently provided little evidence in this respect and, indeed, the team noted two programmes where the programme specifications omitted to state to which subject benchmark(s) they related. Additionally, the team was concerned to note that the FDSc in Nutritional Therapy had been permitted to begin operation as an award of the University before it had successfully demonstrated the mapping against a benchmark statement, which had been required as a condition of approval.

75 The University's view is that the precepts of the *Code of practice* are embedded in the policies and regulations, as expressed in a variety of documents including but not limited to the Academic Regulations and the Quality Assurance Handbook. With the exception of the *Code of practice, Section 7: Programme approval, monitoring and review*, the audit team found that the precepts of the *Code* are indeed appropriately reflected in the University's policies, regulations and working practices. There was also evidence of timely and appropriate consideration of revisions to the *Code*. For instance, in considering the *Code, Section 2: Collaborative provision and flexible and distributed learning (including e-learning)*, published in September 2004, the University had carried out a 'gap analysis' process which demonstrated detailed consideration of the precepts of the *Code* and had appropriately identified areas for action in respect of desirable modifications to policies and practices.

76 The audit team also noted a number of other aspects of the University's working practice that demonstrate appropriate alignment with the precepts of the *Code of practice*. Examples included the guidance for external examiners, including examiners of research degree candidates, contained in the Quality Assurance handbook; and the clear policy, with its associated 'Statement of Service', contained in the University's Policy for Careers Education, Information and Guidance (CEIG).

Programme-level review and accreditation by external agencies

77 The University has links with 20 PSBs and the supervision of the links within the context of increased devolved management to departments has, according to the SED, provided a more responsive approach to the needs of external stakeholders. Thus the immediate link with PSBs is located at subject level, although the process of application for accreditation is facilitated by the CQAE. The University oversees the liaison with the PSBs through the committee structure at department, faculty and university level, the

Dean of Quality Assurance is the University's 'formal correspondent'. Programmes accredited by PSBs follow University quality assurance systems unless there is a requirement that cannot be accommodated within the existing arrangements. The Annual Report of Course Development and Approval Activity, considered by TQSC, includes summaries of accreditation/validation events for programmes seeking accreditation by PSBs. The committee papers examined at the audit demonstrated that the University follows its procedures, in relation to PSBs, in an appropriate manner.

78 External review reports are considered by the course or field committee in their role of taking primary responsibility for the quality of academic provision. In turn, these committees report to the FTQSC, and these minutes are presented to the University's TQSC. Field Chairs are responsible for drafting the Annual Field Monitoring Report which includes the actions taken in response to reports from external agencies.

79 The audit team found that the outcomes of external reviews and validations with PSB accreditation were recorded in the minutes of faculty committees, however, there was a lack of detail about the actions required/undertaken to fulfil any recommendations. There was also evidence that this applied at university level. For example, the October 2003 Academic Board congratulated staff from the Luton Business School and the central academic support departments on the 'very favourable outcome' of the developmental engagement in Business and Management, held in May 2003. But it was unclear from the minutes whether Academic Board had noted the recommendations and whether or not further reporting of the response would be received by the Board.

80 From the evidence available, the audit team concluded that reviews and accreditations by external agencies are managed appropriately and in a timely way. However, the team considered that the University could better capture, through accurate reporting, the discussion and subsequent actions regarding the outcomes of these activities to encourage enhancement practice. This is one example of inconsistent and

inaccurate documentation that was evident during the review. The standard of reporting goes against the University's own advice: 'Reports must therefore be self-explanatory and provide a clear indication of discussion and conclusions to an external audience with evidence and analysis sufficient to explain the panel's conclusions and any conditions of approval and recommendation'. Therefore, the team considers it advisable that the University develop consistent, accurate and coherent reporting protocols so that senior committees of the University are able to exercise their responsibility fully.

Student representation at operational and institutional level

81 At institutional level the President and Vice-President (Education) of the ULSU sit on the TQSC, Academic Board and the Board of Governors. Monthly meetings are held between Student Union Executive and senior managers of the University, chaired by the Vice-Chancellor. A Student Consultative Committee has been established by the Dean of Students, a newly created role to act as an advocate for students, which will supplement these monthly meetings. At a local level student representatives are elected to serve on field/course committees, FTQSC and Faculty Boards. Additionally, meetings of focus groups or staff/student committees are held for specific purposes. An introduction to the role of student representative is provided in the Small Print, a University publication provided to all students at the University and collaborative partners which summarises the reciprocal obligations of the University and its students, and a University Code of Practice on student representation is made widely available. The SED noted that the ULSU takes an active part in encouraging recruitment and delivering training for student representatives, and has set up a VLE site as a forum for representatives to exchange views. The University and ULSU jointly publish a comprehensive and accessible handbook for course representatives.

82 The SED stated that the University considers student representation to be an integral and valued feature of the academic committee system

and that while the system at local level is well established, its procedures for appointing and briefing student representatives have become more securely based in recent years.

83 The SWS noted that the ULSU believes that the level of student representation in the University is, on the whole, effective and respondents rated representation positively. At course/field level, the audit team heard that the system of student representation supported by day-to-day liaison works well and examples of responsiveness of the University to student representatives were cited. The SWS stated that the standard model agenda for field/course committees includes a standing item on student issues that has moved the matter to a position of more prominence and ensured that the student voice is heard at every meeting.

84 The ULSU believes that it is listened to and is able to represent the student body effectively. However, it characterised the flow of information in meetings with senior managers as being predominantly from the Student Union to the University. For example, it considered that it had not been sufficiently informed about the impending linearisation of programmes within the modular framework. Nevertheless, the University considers that communication with the ULSU had taken place and that the level of communication was not the cause of concern among students over the loss of module choice. Officers of ULSU indicated to the audit team that they were not always clear about the capacity in which they met with the Dean of Students given that the individual is both the Dean of Students and the Dean of Quality Assurance and the team considered that this was a matter that the University may wish to consider to ensure that there is no confusion between the two roles (see above paragraph 35). The team saw evidence of a wide range of collaboration between the University and ULSU. For example, ULSU Officers were involved in the review of student administration process and had contributed towards the drive to improve retention with a 'drop in, don't drop out campaign'. Links have also been established

between course representatives at partner colleges and the ULSU.

85 Overall, the audit team formed the view that there is effective collaboration between the University and ULSU that has strengthened student representation. However, this collaboration is not always seen by the ULSU as amounting to a process of consultation in relation to strategic development that impacts directly on the student experience. For example, while the team heard that students had expressed positive opinions about the benefits of a greater association between cohorts of students, programmes and subject departments they did not consider that they had been adequately involved in the discussion about the move towards a more linear modular scheme. Therefore the collaboration might be further strengthened by ensuring that the flow of information is seen to work equally well in both directions.

Feedback from students, graduates and employers

86 The University uses a number of mechanisms for gathering feedback from students. The main instrument for feedback is the SPOM survey which the University regards as a 'useful tool of quality management'. SPOM forms are used to collect student feedback on individual undergraduate modules each semester and ratings for each module are matched to averages at module, faculty and university level. TQSC receives an annual summary of the SPOMs and a brief report is then presented to Academic Board. Faculties are responsible for monitoring modules where performance is much higher or lower than the average. Examples of FTQSC consideration and response to SPOM analysis were seen by the audit team including the request for Field Chairs who represented modules with 'five or more areas for improvement' to send a written response and action plan to the Chair of the Committee.

87 The SED noted that although the SPOM is the key tool for collecting feedback in the University, it has a relatively low response rate at 25 per cent. Undergraduate students met by the audit team in the course of the DATs

showed little awareness or were not supportive of the system, although the SWS made no reference to how students viewed SPOMs. The problem of low response rates was identified in the 2001 audit, and even with 'significant management attention to methods of collection' the decline in responses has not halted. The University recognised that while response rates were falling the SPOM provides a useful source of longitudinal insight into student satisfaction at individual module level and noted that the average level of student satisfaction had increased over the past four years. A review of SPOM is going to be undertaken so that any changes would be ready for implementation in 2005-06.

88 The SEQ was piloted in 2002-03 and used corporately in 2003-04 and gathers student feedback at the undergraduate and postgraduate programme level and gathers both quantitative and qualitative data. However, the analysis of the data for 2003-04 was not yet available at the time of the audit and, therefore, no indication of response rates or how the data was to be considered by the University was available.

89 The audit team saw evidence of student feedback mechanisms discussed at University committees. These included the different student questionnaires: SPOM, SEQ and the national student survey pilot. TQSC regularly receives reports on the operation and results of feedback through departmental review reports, AMRs and the annual SPOM reports.

90 The audit team saw evidence of the University responding to student feedback at a local level. Field/course committees address student concerns and report directly to faculty boards who in turn report to Academic Board. Field/course committee minutes can also be sent to departmental committees at which department level issues can be identified. Although the SWS suggested that more could be done to enhance student representation at a local level, the team concluded that overall, students considered that the level of representation was good and representatives' views listened to.

91 The SED noted that feedback from graduates is of an informal nature at present. There is an Alumni Association and there is access to this through the University website. Attempts at formal arrangements are currently being sought in China through an alumni association and some development work has taken place to identify a way forward.

92 Relationships with employers are conducted in different fora: the Knowledge Hub acts as a centre for contacts, while the University has an excellent scheme involving academics as 'employer partner fellows' or 'employer liaison fellows' (ELFs) to replace the former system of employer boards. ELFs act as 'champions' within their departments for managing relationships with employers on a range of matters. The Court has remained to offer an annual university level input from employers in the region. The audit team consider that the ELFs are an example of good practice.

93 The University makes arrangements to include employer feedback in PSB reviews. However, the audit team found little evidence of employer involvement in the development of FDs.

94 The audit team came to the view that, in general, the University has mechanisms to gather and respond to student feedback. However, in relation to questionnaires, concern remains about the level of student participation with the questionnaires. The team considered it desirable that the University looks to improve student participation in programme evaluation procedures to enhance local academic practice. The team was unable to make a judgement on the effectiveness of graduate feedback due to lack of specific evidence. However, the team considers that employer feedback in general is sufficient but had reservations about the degree of employer input into the development of FDs.

Progression and completion statistics

95 The SED accepted that there is scope for improvement in the timeliness of the production of statistical data concerning student progression and achievement, as well as in the use which is

made of such data. The University's new student record system is now in use for enrolment and module registration, and the University places considerable reliance on it to produce good management information in the future. In particular, it is regarded as a priority to make use of the system in order to monitor student retention and achievement more effectively.

96 At subject level, the audit team noted examples in AMRs of useful statistical data relating to student completions and to student performance on individual modules. The team would suggest that a fuller and more constructive use of data from SPOM forms, analysed alongside student progression and completion data, might offer up opportunities for enhancement at module or at programme levels.

97 The audit team observed very little evidence that the University currently routinely gathers statistical data relating to the progression of students from differing backgrounds and with differing qualifications on entry which would assist the University to know that it is fulfilling its mission to help all students to attain their full potential within a socially diverse community. The University recognised that the gathering and analysis of statistical data is an important tool in this respect and aims to ensure that the student record system will provide it with the necessary information. The team would encourage the University to ensure that the system is capable of monitoring the progress of students in a way that will allow it to compare the progression of students from different backgrounds and entry paths.

98 At institutional level, the University prepares annual reports on the operation of the Undergraduate and of the Postgraduate Modular Schemes. These reports include useful and thoughtful analyses of trends in student admission and attainment across the institution. Statistical data in respect of performance on individual modules is used to compile an annual list of 'weak performing modules'. In 2003-04, each of the coordinators of these modules met the Vice-Chancellor and the Deputy Vice-Chancellor to discuss matters relating to

student performance on the module. Although the Undergraduate Modular Scheme Annual Review for 2004 noted that these discussions proved extremely helpful, it was too early to make any judgements as to the effectiveness of this process in securing quality enhancement.

99 Overall, the audit team would commend the University for the apparently successful introduction of the student record system, while also encouraging the University to make yet greater use of statistical data concerning student progression and completion in order to identify opportunities for quality enhancement.

Assurance of the quality of teaching staff, appointment, appraisal and reward

100 The SED explained that the University's human resource priorities currently focus on three areas: completing an institution-wide job evaluation by 2006; implementing a more comprehensive set of training and development activities; and introducing a staff appraisal scheme linked to corporate objectives. The policy on recruitment and selection identifies the responsibilities of the heads of departments and the Human Resources Department. The Recruitment and Selection Guide describes the process in detail and makes it clear that training is compulsory. In order to ensure consistency of practice the central management of the University is represented on all appointments panels for academic staff. Appointments to a readership, professorship or senior position include the involvement of an external subject specialist or external adviser. The University stated that it is reconsidering the criteria for promotion to principal lecturer and considering re-launching the University's teaching fellow scheme.

101 In its SED the University described how, overall, its human resource management is evolving from a transactional approach, focused on administration, to a transformational approach focusing more on strategy and change within the sector. It believes that this change is effective in matters such as: human resource infrastructure, recruitment, progression and performance management policies, equal opportunities and

job evaluation issues, and measures to improve the level of management skill.

102 All staff employed by the University are required to undergo an annual staff review in order to review performance, reflect on changing work practice, agree personal objectives in relation to departmental and University priorities, and identify training and development needs. The link between staff review and staff development is evident in staff review procedures. The audit team was told how the annual review scheme operated in practice and examples were given of where the review process had led to an increase in research activities. The team formed the view that the annual staff review process contributes to the assurance of the quality of staff.

Assurance of the quality of teaching through staff support and development

103 The SED described academic staff development as occurring at two organisational layers. At a corporate level the University takes responsibility for the initial development of new staff and the continuing professional development of all staff with respect to institutional policy and national changes. Operational responsibility lies with the Staff Development Unit, in the Human Resources Department. At a departmental level staff development is more focused on the subject and includes peer observation of teaching. The University policy on staff development sets out the purpose, principles and priorities, and the responsibility of staff for its implementation.

104 The SED explained that corporate training and development activities centre on ensuring staff are equipped to deliver the academic plan for FDs; an increase in international student numbers and a proportional rise in postgraduate students; enhanced student care, management development; and a diversity action plan. The Staff Development Policy reflects these foci and is available on the University's website. About one third of the academic staff are registered practitioners of the Higher Education Academy (the Academy). The University is currently

discussing with the Academy the accreditation of its proposed postgraduate course in Academic Practice, which will replace the existing Postgraduate Certificate in Higher Education. The course is intended to prepare staff new to teaching for membership of the Academy and to provide a continuing professional development framework for existing staff. The SED reported that staff from collaborating institutions who teach on University programmes can participate in the corporate staff development programme and can register on University programmes under the normal reduced fee arrangement, and that discussions are currently underway about how to extend the Academic Practice programme to these and other staff. Special arrangements are made for the training of research students who teach.

105 During the visit, the audit team saw an annual academic staff development programme and a quarterly training and development programme which included compulsory core courses, operational/role-based courses, teaching and learning courses, and e-learning information technology (IT) training. Staff in departments reported on staff development activities; those activities commented on favourably included a course for field chairs and opportunities to register for higher degrees. The team heard that peer observation of teaching was ongoing. The team noted that staff development opportunities were made available to staff in partner colleges which reflected the developmental nature of their relationships with the University. A programme of staff development for partner institutions is operated by the University and a Guide to Teaching (and assessing) HE in FE has been prepared for staff at the University and in partner colleges. From the information received the team was able to confirm that staff development opportunities available were consistent with the description in the SED and appropriate to the needs of the institution.

Assurance of the quality of teaching delivered through distributed and distance methods

106 One of the identified drivers of changes in the University's academic quality and standards systems is changes in the composition of the student body, changes in part arising from a growing proportion taking programmes taught off campus on what the University describes as 'distributed sites or by collaborative partners'. The University anticipates an 'increasingly distributed character of the pattern of teaching' and its development plan looks to continuing innovation in providing services which are flexible and remotely accessible, in all modes, on campus, at a distance, or based with collaborative partners. The current teaching, learning and assessment strategy is currently being revised in the light of an expectation that about 20 per cent of students may be taught off campus.

107 The University has a clear understanding of the significance of the implications of this strategy, particularly in relation to learning resources which have been a traditional strength according to the University and as borne out by external scrutiny at institutional and subject level. In terms of implications for quality and standards, and the further evolution of systems, however, the picture was less clear, as far as the audit team was concerned. It did find evidence to confirm that the University, as claimed, employed gap analysis techniques, referring modifications in the *Code of practice* to relevant functional areas. Thus, in the case of the eMBA, the scheme and its operation had been recently mapped against the sections of the *Code* dealing with distributed and distance learning, in what appeared to be a thoughtful and thorough manner. The team assumed but was unable to tell from documentation provided how the resultant analysis would inform development at the programme level, in what timescale or how a University overview was to be maintained.

Learning support resources

108 The SED explained that Learning Resources is an organisational unit bringing together the Library, Careers Service, support for audiovisual

equipment, the VLE and computer-based assessment. The SED stated that the ratio of students to resources is favourable and compares well with peer institutions.

Development is planned against best practice in the sector, library collections are benchmarked, and Discipline Support Plans for each field are approved by academic departments as part of the annual monitoring cycle. The audit team noted that feedback is gained from users in a variety of ways: through membership by academic liaison librarians of a number of university committees as well as faculty boards, field and course committees, focus groups, suggestion boxes and also through questionnaires and feedback sheets. Responses are published on notice boards and on-line.

109 The SED also highlighted the positive comments received from external reviews about the quality of the library service, the subject librarians and the Discipline Support Plan as a tool for effective analysis. The University places a strong emphasis on digital services and offers advice on such matters to collaborative partners. Students on validated programmes in collaborating institutions have full membership of and access to the University's learning resources.

110 The 2002 audit report recommended an enhancement of the learning resource support systems available to an increasingly diverse student cohort and the University has responded to this in a variety of ways as outlined in this and the following sections of the report.

111 The SWS highlighted that students rated many aspects of the learning resources provided by the University positively including: library opening times, photocopying and printing facilities, helpfulness of staff, the range of computer-based information, and access to the internet. The DATs also confirmed that students, both at the University and in partner colleges, viewed the induction to the library, the language centre and the use of University's VLE, positively. However, the view expressed in the SWS that in some subjects there were local student concerns about the availability of books and journals and access to University computers was confirmed in some of the DATs although the University

maintained that the provision of such facilities is comparable to the sector as a whole. It was suggested that access to more computers without access to the internet would support students who needed to complete assignments.

112 Learning resource staff noted that Discipline Support Plans were a particularly useful tool for library liaison with academic departments and that the informal Library Liaison Group, attended by the University and partner college librarians, assisted with support for students studying at these sites. The audit team consider that the Discipline Support Plans and the Library Liaison Group are examples of good practice.

113 Evidence seen by the audit team confirmed that the role of academic liaison librarians was considered effective, particularly during induction and in the development of Personal and Professional Development modules.

114 The audit team formed the view that there was effective representation by Learning Resources on University and faculty committees which ensures that it maintains an institutional overview and input into University activity, particularly the corporate drive on student retention.

115 The SED stated that extensive efforts are made to obtain feedback from users. It described how, in addition to the functions of academic liaison librarians and membership of central and faculty committees, focus groups, a suggestion scheme, questionnaires and feedback sheets are used. The SWS indicated that the University shows commitment to development and productivity of feedback methods and to action and the audit team heard from learning support staff the importance that is placed on feedback about the library and VLE resources.

116 The University's progressive introduction of the VLE has enhanced the advice offered in support of student assignments and, the audit team heard, is regarded highly by students and staff. The University has set a target date of September 2005 for all modules and programmes to be making use of the VLE which will ensure greater consistency within and across departments.

Academic guidance, support and supervision

117 A new policy framework for student support services underpins the University's student retention strategy and to this end there has been an 'intensive and radical review of its academic guidance, support and supervision processes during 2003-04'. Corporate support services have been re-organised and three new departments created: CAAS, Learning Support, and Pastoral and Welfare Services. These build on the strengths identified in QAA subject review reports and in response to the 2002 audit report recommendation.

118 The Guide to Student Retention and Attainment July 2004 outlines the University's strategies which includes induction, diagnostic testing, STAR, PPAD modules and scheme modules with concomitant monitoring of attendance and is widely available to staff. It states that 'identifying students at risk early and taking action is key'.

119 CAAS offers independent, supportive and confidential advice to students, thereby supplementing existing departmental level support arrangements which the University considered unable to support fully students at risk. CAAS focuses on students at risk and in addition it considers deferrals, withdrawals and extenuating circumstances. The SED stated that CAAS offers students a more customer-focused service, encouraging them to complete their programmes successfully and the audit team saw evidence to confirm this view. Staff of this service meet collectively as the Extenuating Circumstances Board on a regular basis, to make decisions about applications based on criteria approved by the TQSC. There was evidence that the Extenuating Circumstances Boards provided an effective mechanism for dealing with individual difficulties promptly. The team considers that the Extenuating Circumstances Board provides a fairer and more consistent approach than the previous process.

120 The SED stated that the Learning Support department aims to support students with problems with literacy including dyslexia,

English language difficulties, weaknesses in IT, numeracy or study skills. A drop-in-service was piloted in 2003-04 and this has now been implemented as a daily service.

121 An innovation for 2004-05 is the STAR Boards which meet four times a year to monitor students' academic progress with a view to contacting students at risk and offering academic advice on programme-specific matters or referring them to the Learning Support Service. These were considered a positive development by ULSU officers and effective by staff. Linked to this the improvement in the provision of student information by Registry is an important dimension in assisting departments to identify students enrolled on modules and chart student progression. This is supplemented in some areas by the use of attendance registers over an extended period of time that has demonstrated a direct relationship between attendance and performance.

122 The University has been involved in the national debate about progress files and PDP and is implementing a new curriculum model with a spine of PDP modules, one at each level of the undergraduate curriculum. These modules have been developed with support from the Careers Service and librarians and aim to assist with development of transferable skills, career planning and personal development. The successful nature of this work has been recognised through the recent success in a CETL bid which it is anticipated will further enhance this type of academic support for students. Evidence from the DATs indicates that the development of PPAD modules has been positively received by students.

123 Support for students begins at induction and the SED stated 'that academic departments are encouraged to carry out initial screenings during the induction period', to identify students with a range of language-related problems and to refer them to the Language Centre drop-in service, for ad hoc support, or to enrol them on one of the two special English Language modules. The audit team considered that this was a positive development but found some evidence that indicated this screening is

not yet widespread and that the process needed to be embedded further. Programme-based advice is available at departmental level and staff make themselves available during advertised times. However, the SWS identified several areas of concern regarding academic support arrangements. Of note were the availability of teaching staff, sufficient teaching staff surgery hours (particularly for media, art and design, psychology, tourism and business studies students), the quality of feedback on assessed work and promptness of feedback. In contrast students in the DAT meetings highlighted very positive relationships between students and tutors, with effective academic guidance provided. Students appreciated this type of support, and recognised that some staff teams were working in difficult situations. The University is not convinced that the arrangements for programme-based advice are sufficiently systematic or proactive and discussions about the re-instatement of a personal tutorial system are underway. The team formed the view that there were generally satisfactory academic support arrangements for students at the departmental level.

124 The 2002 audit report was complimentary about the University's approach to the management of the supervision of research students. In 2003 the University reorganised research into six Research Institutes which have responsibility for coordinating support. Support is provided informally, by drop-in sessions and through bookings, for project supervision and thesis supervision. Research students reported sound supervision for preparation of conference papers, particularly international students. Postgraduate students were also very positive about support from tutors, CAAS and the International Office.

125 The annual research students' monitoring report for 2003-04 identifies as a priority the need for full compliance with the *Code of practice, Section 1: Postgraduate research programmes*. A review of the postgraduate environment including evaluation of procedures, access to resources and facilities is underway.

126 Approximately 31 per cent of the student population is international; and the audit team explored with a group of international students the support they received both for improving English language and to assist with integration into the main student body. Several students had taken advantage of the opportunity for additional language support, including a summer school and twice-yearly sessions on English for academic purposes, and all felt well integrated into the life of the University. The international advisers working in the Student Centre were considered very active in providing a range of events for international students. The staff of the Centre for language Education use a University-devised English language test to grade the language ability of international students which is considered effective and compared well with the results from other assessments such as the International English Language Testing System. As a consequence staff did not consider that problems existed with poor language ability of international students, and evidence from the DATs supported this view.

127 In discussion with the audit team some University staff tended to minimise the changing pattern of student need which belied the measures taken to accommodate the corporate drive on student retention, recruitment of increasing numbers of international students and the university mission as an access institution.

128 The audit team formed the view that the quality of academic guidance, support and supervision is appropriate. The team considers the STAR Boards, the PPAD modules and CAAS to be effective and examples of good practice.

Personal support and guidance

129 The University provides a range of specialist student services, co-located, with the ULSU Advice Centre, in the Student Centre since 1999 which provides an integrated and convenient service to students on all matters relating to access, admissions, finance, welfare support, student financial support and student accommodation. The range of specialist

services includes support for international students, for students with disabilities, counselling, health and chaplaincy services. The SED noted that there is close working between the Heads of the various services and the Executive of ULSU which runs the Students Union Advice Centre.

130 The CEIG policy of the Careers Service has been matched against the *Code of practice, Section 8: Career education, information and guidance* and has been accredited with the Matrix Quality Standards. Support for students with a disability has also been matched against the *Code of practice, Section 3: Students with disabilities* and is monitored by the Disability Advisory Group which reports to the Equalities Committee.

131 The student web provides helpful information in the form of an extensive site map, student guides, many of which are focused on the needs of international students, and information about CAAS and extenuating circumstances. It also highlights the Student Advice Centre and its role in providing non-academic advice.

132 In the separate meeting with international students and in the meetings with students in the DATs, the audit team received a very positive view of the University's support for international students and the ULSU Student Advice Centre. Similarly students in partner colleges were positive about the support provided for them.

133 In meetings with staff the audit team heard that the different forms of support services, which operate independently, are managed by separate heads who liaise informally. There is a Support Executive coordinated by the Director of Learning Resources, Library and Careers who is also Director of CAAS. However, this is an informal body and does not form part of the academic committee structure. The team considers that it might be useful to formalise this arrangement.

134 There is a range of evidence in the SED that the University is monitoring the support it provides for students with disabilities. The SWS also provided the University with a useful source of feedback on the perceived effectiveness of the student support services it

provides. International students met through the DATs were also positive about the support provided to them by the University. The audit team formed the view that the support provided for students was effective.

Collaborative provision

135 The SED described how the University, since the previous audit, has increased its collaborative activity predominantly through FDs delivered in FE colleges in support of its mission for access and opportunity. There has also been a development of partnerships with private, specialist providers in the UK and, through articulation arrangements, with providers in China and the South Asian sub-continent. The University has validated courses at, and given associate college status to, a relatively new and growing private college in Oman. There is also an innovative, electronically based distance-learning MBA (referred to by the University as the 'eMBA'), intended to be delivered overseas across a number of sites, currently operating at the college in Oman and about to be delivered in India. A major new partnership with two other universities and the relevant SHA has been created to establish a postgraduate medical school. Distributed provision has increased since the last audit and based on the information available to the audit team at the time of the audit, appears to be set to increase further both in scale and complexity.

136 In considering the quality management of its collaborative provision, it is evident that the University has appropriately reflected the precepts of the *Code of practice: Section 2 Collaborative provision and flexible and distributed learning (including e-learning)*. The University stated that it has sought to rationalise the range of relationships into a small number of categories to reflect changing strategic and operational realities.

137 There are four categories of collaborative provision according to the SED. The first is FDs 'designed and delivered on a partnership basis', each subject to overall academic leadership from the University. The second is a validated programme where the design and delivery are

the responsibility of the partner institution concerned. A variation on this is associate college status, applicable to partner colleges that have made 'substantial progress towards becoming academic communities', but granted so far only to its partner in Oman. A third category is articulation arrangements, described as presently the favoured form of collaboration with overseas institutions. And finally, a fourth and 'emerging' category is identified in the network of international institutional relationships being developed for the delivery of the eMBA. The University explained that there has been a move away from the franchise model as it requires a high degree of oversight and has, according to the SED, 'significant operational challenges', particularly the alignment of teaching and examinations at partner organisations and the University.

138 The audit team noted that the description of collaborative provision in the SED, divided into four categories, was not the same as that in the Quality Assurance Handbook where six categories are listed. Based on its understanding of the current collaborative provision gathered in the course of the audit, the four categories do not capture adequately or accurately the range and nature of existing arrangements. In terms of existing fit, for example, the team noted that the development of FDs over the last two years has in practice encompassed a corporate, university-led model of standardised FDs, located, with only minor local variations, in established local partner colleges, and a number of stand alone approvals converting existing diplomas at new college partners, or, as the SED explained, relationships 'developed with some specialist national providers'. Nor in practice does the prominent 'partnership in design and delivery' feature appear to have been adhered to, since the development and approval phase for the majority of courses in 2004, to run in 2004-05, was so late and truncated as to effectively preclude meaningful involvement by partner colleges. In one instance, the team was told that a new FD course was approved to run in a college where subsequently students were surprised by some of the course content,

unclear about its relevance and still unaware of the title of the award they would receive.

139 In the case of an existing diploma, converted at a new specialist partner into an FD award of the University, the audit team was concerned about the approval process used. It noted that the mapping of the proposed programme against relevant external benchmark statements for FDs had not been carried out, had been identified as a requirement but apparently not one that should delay immediate commencement. This mapping was to be carried out during the first year of operation, reported through the annual course monitoring process. The University therefore approved a course at a new provider without benchmarking the provision. Nor is it clear to the team how any mismatch could have been addressed to secure timely changes affecting the second year of entry. The team noted that at the time of the audit, some eight months later, the benchmarking exercise was still to be carried out.

140 As the eMBA was described in the SED as 'an emerging collaborative provision category' the audit team was particularly interested to follow the process that was adopted for approving the award and the delivery sites. Approved as a generic scheme in 2002, the eMBA finally commenced in October 2004, with a 30-student cohort, at an associate college of the University which had been a partner since 1999. The original scheme validation in 2002 was undertaken on the basis that the University would directly set and mark all assessments, the partner providing facilities and support. There was a provision that a collaborating partner might, having once proved itself, be allowed to undertake some of the academic delivery, but this is not evident in the proposal. The team was told that the sole partner currently operating the eMBA carries out aspects of the academic delivery including some marking. It was not clear to the team whether, and on what grounds, the partner had been formally approved to offer the award and to have these additional assessment responsibilities. In relation to the latter point the University has subsequently clarified that all scripts are marked by the University staff;

Marjan staff may undertake marking on a 'shadow' basis so that the University can calibrate standards. In meetings with the team senior academic leaders with a management responsibility for the programme stated that the College had been chosen because 'it was known to us' and confirmed that there should have been a formal approval event. The team did see an initial approval of local staff profiles and a brief confirmatory evaluation of IT facilities but it was unclear as to the status of the document. There was, however, evidence of site visits to evaluate the facilities of other prospective partners overseas and of subsequent reports.

141 The audit team noted that while the AMR listed the associate college as offering the MBA, there was no record of how TQSC was involved in the approval process, where formal responsibility, on behalf of Academic Board, for the standards of awards, when delivered abroad, effectively resides. While the team saw evidence that other potential partners had been visited by the University, and the associate college had delivered other University awards for some time, nevertheless the team considered that the University should review the mechanisms by which it approves partners for delivering the eMBA, particularly at the point where aspects of academic delivery and assessment responsibilities become a responsibility of the partner.

Section 3: The audit investigations: discipline audit trails and thematic enquiries

Discipline audit trails

142 In each of the selected DATs, appropriate members of the audit team met staff and students to discuss the programmes, studied a sample of assessed student work, saw examples of learning resource materials, and studied annual module and programme reports and periodic school reviews relating to the programmes. Their findings in respect of the academic standards of awards are as follows.

Computing

143 The DAT covered all taught postgraduate programmes in the Department of Computing and Information Systems, specifically:

MSc Computer and Internet Applications

MSc Computer Animation

MSc Computer Science

MSc Computing and Information Technology

MSc Computing and Internet Technologies.

144 The DSED consisted of a contextual paper written specifically for the audit describing the provision, and was accompanied by programme specifications, copies of recent validation reports relating to the MSc Computer and Internet Applications, the MSc Computing and Internet Technologies and the MSc Computer Animation, copies of the previous year's reports from external examiners, the most recent AMR, and statistical data relating to student admission and progression.

145 Programme specifications provided clear descriptions of the aims, the intended learning outcomes and the curricula of each programme. The audit team heard that the University ensures that programmes are aligned with the FHEQ by means of its level descriptors, which it regards as being aligned with corresponding parts of the FHEQ (see above, paragraph 53). While the audit team accepted that the University's Level M descriptors are indeed broadly aligned with the precepts of the FHEQ, it did not see strong evidence that validation processes had confirmed the alignment of these programmes with the level descriptors.

146 Programmes in the Department of Computing and Information Systems have not been the subject of a Departmental Review. Rather, the validation process of May/June 2002, covering the Department's undergraduate provision as well as the MSc Computer and Internet Applications and the MSc Computer Science, had substituted for a Departmental Review. The report of the validation event showed evidence of thorough consideration of the programmes concerned. However, in comparing the nature and outcomes of the

validation event with the intended purposes of Departmental Review, the audit team formed the view that the validation process had provided an inadequate substitute for a Departmental Review.

147 In considering the approval process for the MSc Computer Animation in June 2003, the audit team noted that the validation event had been conducted by a panel consisting of only two members and an officer, that both members were drawn from the staff of the University itself, that one of the two was the Sub-Dean (Quality Assurance) of the faculty responsible for the proposal and that he had acted as chair of the meeting. The team heard that the nature of the University's process had been informed by the fact that the programme was in part based on existing provision, albeit not in computing, and by the fact that external advice was sought and gained during the approval process. While accepting that advice from an appropriate external academic had been gained in writing as part of the approval process, the team formed the view that the absence of external representation, or indeed of any subject-specific expertise, from the validation event had deprived the University of opportunities for generating discussion and debate about the programme and for the programme enhancements which may have resulted from such debate.

148 The programmes are subject to the University's procedures for annual monitoring. The most recent AMR showed evidence of a thoughtful and detailed analysis of a wide variety of aspects of the programme and its delivery. The audit team noted in particular the careful attention which had been given to addressing comments made by external examiners, to the construction of an appropriate action plan for the coming year and to detailing progress on the previous year's action plan. Although not a requirement for postgraduate programmes, the team noted that some modules had used SPOM questionnaires to elicit student's views about the module, but that there was little evidence in the AMR of constructive use of the outcomes of SPOM questionnaires at either module or programme level.

149 The DSED included detailed data relating to student progression and completion, particularly within the AMR. Student attainment appeared to be good: 93 per cent of students who received an award in 2003-04 received either an MSc or an MSc with Distinction. The programmes are described, for full-time students, as being of either 12 months or 16 months duration. However, the manner of presentation of the data and the fact that the programmes have two annual starting points (in February and in September) have prevented the University from drawing conclusions about the proportion of students who complete the programme within the specified duration.

150 The audit team noted the wide diversity of student backgrounds and qualifications on entry, and formed the view that this diversity is consistent with the University's aim of being an 'access university'. However, the team failed to find evidence of any systematic analysis of achievement against entry qualifications and background, and judged that an analysis of this type, particularly in respect of international students, would usefully enhance the University's ability to fulfil its aims in respect of access and participation.

151 In considering examples of students' assessed work, the audit team found evidence of tasks being set at appropriate levels and of work of very high calibre by some students. In relation to the MSc Computing and Information Technology the team heard that the postgraduate nature of this programme is based on the prior honours-level experience of students, enabling them to bring a high level of critical awareness to their work and to develop their conceptual understanding at an increasing pace through the programme. However, based on the work seen and the external examiner's report, the team was concerned that repeated use of assessment strategies based on recall of factual material placed weaker students at risk of reproducing material with little understanding or application. The team, noting that this programme is described in the University's Postgraduate Prospectus as a 'conversion programme', formed the view that the University could more easily make apparent its alignment

with the FHEQ by adopting a wider range of assessment tasks, perhaps making greater use of case-studies or of open-book examinations based on more discursive questions.

152 Learning resources for these programmes appeared to be satisfactory. The nature and availability of facilities were indeed described in glowing terms by students. The availability of resources appeared to have kept pace with the recent considerable increase in student numbers. The Discipline Support Plan for library provision, produced in 2002-03, provided a useful description of links between the library and the department and valuable comparisons regarding library provision with other benchmark institutions. The audit team noted, however, that the Plan made no specific reference to provision for postgraduate students despite the considerable expansion in postgraduate numbers which took place shortly afterwards.

153 The audit team heard from students that there are good formal and informal channels of communication between staff and students and students regard staff as supportive and accessible. The student representation system is regarded as effective by both staff and students: examples cited included the changing of opening hours of computer laboratories in response to student wishes.

154 The audit team confirmed that the standard of student achievement in the programmes covered by the DAT is appropriate to the title of the awards and was satisfied that the quality of learning opportunities was suitable for the programmes of study being considered.

Graphic design

155 The focus of the DAT was on the following programmes within the field of Art and Design in the School of Media, Art and Design:

BA (Hons) Graphic Design

BA (Hons) Graphic Design Business Practice (delivered at Dunstable College)

HND Graphic Design (delivered at Milton Keynes College).

156 The DSED referred to the range of graphic design provision for which the University is

responsible. It comprised a contextual statement prepared specifically for the audit, supporting documentation which incorporated a selection of validation and review reports, AMRs and external examiners reports, and programme specifications and statistical data for each of the graphic design programmes.

157 The programme specifications described key aspects of the programmes, included helpful sections on the rationale and curriculum summary, and made reference to subject benchmark statements; they also contained a number of inaccuracies. Programme specifications are approved through the institutions programme approvals process and are amended through the FTQSC. The audit team saw no evidence of consideration of the FHEQ via comparative level descriptors through the approval process. Staff said they found the programme specifications to be useful and gave as an example the way in which the section on programme rationale was used in the student handbook and prospectus.

158 The DSED described how HND graphic design, which was to be delivered at Milton Keynes College from September 2003, had been approved in principle without the necessary documents available, such as the programme specification, which were needed to make the judgement to approve it and only a few weeks before the programme was due to start. The audit team learnt that the required documents had subsequently been submitted although the programme specification contained inappropriate material from another programme located at a different level of the FHEQ. During the audit visit the team heard how the decision to approve the programme had been made and was provided with another document listing the material submitted at the validation event. The team formed the view that in this case the approval process followed by the University was not sufficiently rigorous.

159 The approval of 11 FD programmes developed by the School of Media, Art and Design during 2003-04, of which nine were to be delivered at four partner colleges, was summarised in the DSED: the development

process was described and many of the generic features of the programmes and learning discussed; there was little specific debate about individual programmes and there was no formal decision to recommend approval; in short it was not a conventional description of an approval process or event. The audit team took the view that the University would benefit from reviewing the level of detail at which activities such as this are reported.

160 BA (Hons) Graphic Design is reviewed within the AMR for the field of Art and Design which encompasses 10 programmes delivered at the University. The report contains informative material on curriculum design and development, and on teaching, learning and assessment although most of the discussion, including the action plan, concerns the field as a whole rather than individual programmes. The HND Graphic Design at Milton Keynes was considered as part of the HE course review which included a number of HNDs and FDs in different disciplines, and consequently could also not have been considered very closely. In contrast, the AMR for BA (Hons) Graphic Design Business Practice, delivered at Dunstable College, solely for that course, was able to respond to a range of specific issues. Data on entry, progression and awards at programme level was included in the DSED. This data, the audit team learnt, is appended to the AMR, where the nature of the analysis was found to vary. The team was concerned that where the number of programmes being considered within a single AMR was large the approach might be insufficiently focused to enable issues relating to individual programmes to be identified easily.

161 Reports from external examiners were available for all programmes and were generally positive. Responses with associated actions are prepared for each examiner's report by the programme leader and appended to the AMR. If the external examiner raises serious concerns these are referred to the Dean of Quality Assurance. The audit team saw these procedures in operation. Concerns raised by the external examiner about one programme, delivered at a partner college, resulted in a special review that addressed the key issues and

an action plan which is being monitored. Measures that had been taken included greater alignment of the programme with that at the University, the appointment of a new programme leader, regular team meetings of staff from the University and the partner college and improved access for students at that site to University resources. The team found that the actions taken by the University regarding the operation of the programme had been timely and effective. However, the team also found that there had been some ambiguity and delay in responding to the external examiner's concern over progression standards.

162 The School's approach to teaching, learning and assessment is described in the DSED. Assessment methods are detailed in the programme specifications and module information forms. Continuous assessment is used and all assignments that are an integral part of the programme assessed. Assessment feedback in the form of group 'crits' and individual written feedback is provided which students reported to be helpful and timely. The audit team found that the assessment strategy articulated effectively with institutional policies and was well suited to the discipline. Examples of student work were seen which were in line with the expectations and the views of external examiners. The team confirmed that the standard of student achievement was appropriate to the titles of the awards and their location within the FHEQ.

163 Students consistently reported that the programme that they joined was as they expected from looking at the website and printed prospectus. Students are given course and module handbooks, and briefs for all assignments which they consider to be very helpful in setting out the learning required and how it will be assessed. All students have course tutors who act as academic tutors and informally as personal tutors, operate a regular schedule of tutorials and are the first point of contact for advice. The audit team heard that a special system of joint tutorials with a member of staff from the University and students doing the dissertation module at a partner college was proving to be very effective. The team learnt how the opportunities available for research had

contributed towards teaching, for example, through a series of internal lectures on practice based research. In general, students were extremely complimentary about the teaching staff and communication with them was cited as a major strength of the programmes.

164 Staff student meetings are held for all programmes and students representatives and staff from all programmes attend the field committee meetings at the University. Key issues raised by students have related to IT provision and the working environment. The most recent AMR for the field describes the investment in IT made in response by the School and the establishment of more stable studio bases which has improved attendance. Students expressed enthusiasm to the audit team for the quality of computing provision and for the speed at which other matters had been resolved.

165 The DSED describes how University policy for PPAD was implemented through generic art and design modules in PPAD at level 1 which introduces specific skills, Professional and Development Planning at level 2 which looks at the career context, and a self-directed project at level 3 which encourages autonomous learning. Staff reported that these modules had been successful on degree and HND programmes; students were equally positive giving as examples the acquisition of essay-writing skills and the keeping of creative journals. The audit team also heard how STAR Boards assisted by faculty administrators had identified students at risk of failing for whom additional support could be provided. The team took the view that these developments were likely to make a significant contribution to student learning and retention.

166 The audit team confirmed that the standard of student achievement and the quality of learning opportunities was suitable for the programmes of study leading to the awards of BA (Hons) Graphic Design, BA (Hons) Graphic Design Business Practice and HND Graphic Design.

Language and communication

167 The three programmes covered in this DAT in the Division of Languages and Communication were:

BA English Language Studies

MA in Applied Linguistics (with Teaching English as a Foreign Language (TEFL))

MA in Intercultural Communication.

168 The DSED included a contextual paper written specifically for the audit which described the three programmes, in particular, their history and their academic focus; and referred to other provision in the Division. It also included programme specifications, AMRs for each programme for 2003-04, student data on admissions and progression, one validation report for the BA English Language Studies (2002) and one external examiner's report for 2002-03 and 2003-04. Further documentation was provided including the most recent British Council Accreditation of English Language teaching (2001).

169 There was no reference to the Academic Infrastructure in the DSED. Programme specifications outlined the educational aims and objectives of each programme and the programme learning outcomes. There was no identification of the relevant subject benchmark for the undergraduate programme. In the DAT meeting, staff from the subject area did not make reference specifically to the comparative level descriptors. It was recognised that the FTQSC checked such alignment although the audit team saw no consistent evidence of this.

170 Data on progression and achievement were presented both in the DSED and the AMRs. The BA English Language Studies' first small cohort of students demonstrated a good progression rate from level 1 to level 2. The MA in Applied Linguistics (TEFL) Examination Board of February 2004 confirmed results for the 2002-03 cohort as reported in the AMR 2003-04. Attainment was good with only one student failing to progress to an award because of personal reasons. Students on the MA in Intercultural Communication achieved a high level of success, with nine Distinctions at master's level. The information provided in the MA AMRs brought together the results from both the February and July Examination Boards, whereas the centrally produced data tables in the supporting

documentation were not helpful. In particular, the large number of entry qualifications stated as 'unknown' was unhelpful in tracking the progress of home and overseas students.

171 A periodic review of the programmes has not taken place. The BA English Language Studies was validated in 2002, the MA in Applied Linguistics (TEFL) validated in 1996 and the MA in Intercultural Communication in 2000. These are monitored through the annual monitoring process and the external examination system. The audit team was provided with a summary of the process which explained that the University's CQAE noted, in relation to the Division of Languages and Communication, that 'the University has taken the view that the monitoring of incremental curriculum development through the appropriate FASC (now Faculty Teaching Quality and Standards Committee) is a sufficiently robust quality assurance mechanism for extant programmes, with the added surety of validation for new programmes, where external academic consultation is employed.' In this small Division, staff teach across programmes and are involved in validation processes. However, the team considered that this system ('monitoring of incremental curriculum development') without having the assurance provided by periodic review, results in a lack of scrutiny of the design of an entire programme, such as the MA in Applied Linguistics (TEFL) validated in 1996. In the case of modifications to the MA in Intercultural Communication to replace Psychology option modules, the team formed the view that the reporting of such monitoring activity was not always sufficiently detailed to assure that the FTQSC was robust enough in its procedures.

172 The programmes will be reviewed as part of the new periodic review process in 2005-06; the audit team welcomed this development. The British Council accredited the University in 2001 (next accreditation 2006) for its delivery of English language teaching and noted as excellent the self-access facilities.

173 External examiner reports were comprehensive and confirmed the standard of the programmes. Responses to external

examiners were full and considered. The AMRs highlighted key comments by externals and addressed them in their action points. These were reported to FTQSC. The meeting with staff confirmed that issues were discussed in informal meetings. However, course committee meetings minutes showed no evidence of actions being addressed. The audit team found that the reporting mechanisms did not provide sufficient evidence of monitoring AMR action plans. It was noted by the team that issues were picked up and commented on in the Summary Review of External Examiners' Reports for Postgraduate Courses. The BA English Language Studies was in its second year and therefore did not have an external examiner report yet.

174 The DSED made no mention of an assessment strategy or policy. However, it did draw attention to how the subject team responded to issues of assessment raised by the external examiner reports. The student handbooks all made reference to assessment and provided a range of guidance including marking schemes and regulations, although there was varying advice. In general, students were provided with useful, clear information in these handbooks to help them in managing their learning. The audit team found evidence of assessment tasks set at appropriate levels and standards of assessment at undergraduate and M level were being met. This was confirmed by both MA external examiners. Student work was commended as excellent on the MA in Intercultural Communication. Examples of notable practice were in the use of a standard feedback form, on some modules, for giving constructive feedback; and generic feedback posted on the VLE.

175 The current Discipline Support Plan for Languages provided detailed information of the learning resources provision since 2000 including a benchmarking with comparable universities. Efforts were made to address issues that students raised in relation to resources. Feedback was gathered regularly through course/field committees, but the audit team noted that other methods were also 'desirable'. The Discipline Support Plan highlighted the loss of two

resources due to the closure of a faculty and programmes. However, the students were positive about the learning resources available to them. The late opening hours of the library and the 'fantastic' newly upgraded Language Centre were two resources that they praised particularly.

176 Student representation on the Field and Course Committees in the Division is good. There were examples of issues raised and addressed. For example, the Field Committee minutes for English Language Studies and Modern Languages, November 2003 record the modification of assessment weighting as a result of students' feedback. Students considered that the student representative system worked. However, there was little knowledge of how issues raised through SPOMs was fed back to students. Students considered it better to approach staff directly with queries as they received very supportive tutoring. There is evidence of the close relationship between staff and students in this small Division where communication appears to be good.

177 There are a considerable number of overseas and EU students studying in the Division of Language and Communication. Students gave positive examples of support provided by the Student Advice Centre, and the English Language support available to them. They also praised the work of the International Office.

178 The audit team confirmed that the standard of student achievement and the quality of the learning opportunities was appropriate for the DAT programmes and awards. There was evidence of a thriving research culture for the MA programmes, particularly the success of the Wednesday Workshops for staff and MA students. The undergraduate programme in English Language Studies is relatively new and offers an interesting structure in that the TEFL can be taken as part of the BA degree.

Sports science

179 The DAT specifically considered programmes in sport and exercise science (SES) only. However, many of the modules for Sport and Exercise Science, Sports Therapy, Sport and

Exercise Physiology and Coaching Science are common to all cohorts of students. Staff and students from all areas were involved at the meetings and there was a degree of overlap beyond SES. The DSED included a contextual paper, written specifically for the audit, a programme specification for the SES generic framework including the Coaching Science and Exercise Physiology pathways, a report of the Review of the Department of Sport, Exercise and Biomedical Sciences of June 2003, the AMR of SES, the action plan for 2004-05, copies of external examiners' reports 2003-04 and responses to these together with a summary of associated actions to be taken.

180 The programme specification gives a clear indication of the aims, the curriculum and learning outcomes for the programme and embraces relevant subject benchmark statements.

181 Progression and completion data were included within the DSED for cohorts from 2000-01 onwards, and within the AMR. Summaries of Exam Board decisions were also included. However, the report states that 'It is difficult to obtain accurate progression statistics from the new student records system as all necessary information has yet to be fully migrated from the previous repository'. This explains the reliance on records of Examination and Referral Boards.

182 The AMR of 2003-04 was comprehensive, analytical and self-reflective. It reported on teaching, learning and assessment as well as the student retention priority, curriculum issues, student progression and completion, student support and guidance, quality assurance and research and scholarly activities underpinning level 3 provision. It addressed responses to external examiners' reports, highlighting those where action was required at corporate level and, therefore, beyond the scope of the discipline, for example, regulations linked to student progression, monitoring of student progression, identification of underachieving modules and concerns about the morale and numbers of subject staff, with potential viability problems. Matters relating to learning outcomes, consistency in referencing styles, and consistency in grading were to be addressed locally.

183 The DSED reported that a 'wide variety of assessment strategies continues to be used in modules comprising all awards in SES'. The DAT material provided confirmed this to the audit team. This approach to assessment is consistent with the University's Learning, Teaching and Assessment Strategy 2003-05 which highlights the priority of developing greater transparency of learning outcomes, providing a wide variety of assessment tasks and indicates that the policy and procedures for dealing with plagiarism had recently been reviewed.

184 External examiners considered the assessments were appropriate and standards comparable to those of other institutions. The audit team saw evidence, while looking at student work, of notable practice, in particular transparency of second marking, and the work-related experience modules demonstrating good awareness of reflective practice. Feedback on student work was appropriate and comments reflected the allocated marks. External examiners have confirmed that the quality of learning opportunities is suitable for the named award.

185 Student handbooks for modules were helpful and the external examiners commented specifically on the high standards of the handbooks. The audit team considers that the Sport and Exercise Handbook for 2003-04 is very comprehensive and was devised to help students plan their programmes of study and answer frequently asked questions. It includes guidance on programme specifications, transferable skills, plagiarism, compensation, progression, helpful e-mail and website addresses, as well as the help available within the department.

186 Learning resources and how to access them are listed in the SES Student Handbook. At the meeting with postgraduate and undergraduate students concern was raised about the level of access to the desired range of journals and the long wait for inter-library loan material. The SWS also identified concerns about specialist books in the subject area.

187 Students had raised concerns informally with staff about the rationalisation of programmes and staffing in SES during 2003-04.

However, the loss of staff has continued in 2004-05 and the needs of students have been met by visiting lecturers. In spite of these on-going losses of staff from the Division, very positive relationships between staff and students exist. Minutes of field committees indicate that staff are responsive to student concerns and that revised arrangements would not affect the integrity of the programmes. Students emphasised that 'they appreciated the help and support they had received from staff under very difficult circumstances'.

188 The staffing losses and not being able to appoint a Head of Division for an extended period, despite repeated advertisements, appeared to have resulted in lowering of morale, as indicated by the external examiners' reports of 2004-05. However, staff who were present for the DAT meeting were committed, enthusiastic and hard working and operate very much as a team. It was noted that their workload had increased, frequently eroding their personal time, and that opportunities for research had been diminished. However, two individuals had recently been able to complete a master's degree and PhD. Students were keen to reinforce the view that staff shortages had created problems within the Division.

189 It was the view of staff that changes to the curriculum had resulted chiefly from the staff losses and regretted that they had no choice. They considered that there had been inadequate time to consult students over the introduction of the new linear programme, which impacted noticeably on second and third year students, who had anticipated a greater choice. Support for the 45-credit dissertation had become difficult with visiting lecturers being used to fill the gaps.

190 Students met by the audit team were enthusiastic about the VLE and considered that the PPAD module was useful, particularly since it had been modified through consultation at Field Board. Students were not supportive of the SPOM survey, its accuracy and the lack of feedback on the outcomes. Staff considered that the STAR Board had been significant in helping students at risk and that the new corporate support for students was positive.

191 The Division demonstrated both through the DSED and at the DAT meeting, that advice and academic support for students is strong, having two academic advisers who have been in place for some time. Students can book appointments with advisers through the Faculty office. Furthermore informal staff surgeries are held and final year project tutorial sessions can also be booked. The audit team considered that the strong student support provided for SES students was reflected in the good retention rates.

192 The BSc Sport and Exercise Science and the HND Sports Therapy programmes have been developed with common modules; therefore HND students taking these modules are taught by University staff. Staff met by the audit team believed that the way in which collaborative arrangements were developed is a benchmark for other departments and that the Foundation Degrees under development are good examples of partnership in action between the University and the partner colleges.

193 In conclusion, staff have worked together as a team to overcome some recent challenges and have ensured that students have not suffered unduly and that quality and standards have been sustained. The audit team confirmed that the standard of student achievement in the programmes covered by the DAT is appropriate to the title of the awards and their location within the FHEQ and that the quality of the learning opportunities is suitable for the programmes of study in sports science, leading to the named awards.

Thematic enquiries

194 The audit team did not select any areas for thematic enquiry.

Section 4: The audit investigations: published information

The students' experience of published information and other information available to them

195 The University's key publications for prospective students are the undergraduate and postgraduate prospectuses. Their information is matched to Universities and Colleges Admissions Service entries and programme information. However, the University directs applicants to its website for the most up-to-date information. The website is regarded as the main source of information for applicants and students. The audit team was informed that when the new group of FDs were advertised, close to the commencement of the new academic year in 2004, a brochure was produced to give details to applicants.

196 Internal communication with students is primarily presented in The Small Print and the Student Handbook. There are a variety of other forms of communication with students ranging from 'Life', the monthly newspaper for staff and students, 'thexperience', for students, 'a real flavour of academic life' and 'Noteworthy' the alumni magazine. There are also more immediate forms of communication posted in University buildings, for example, giving information on student support through the CAAS. At programme and module level, handbooks were in evidence, some of which provided excellent guidance. External examiners have commented in their reports on the high quality of documentation for programmes and modules.

197 The University's strategy for ensuring the accuracy of information includes a process by which the draft prospectus is checked by those responsible for quality and programmes: the Faculties, the CQAE and the Planning Unit and, more recently, the new content management system for web information. The responsibility for accurately updating the web information has been devolved to faculty and department level.

198 The audit team met with various groups of students. The main topic of concern was how changes to their programmes of study had been communicated. The SWS noted that 'a number of students expressed their dissatisfaction with the way that course/programme closures were communicated to them. In audit meetings, students raised the issue of advertised options not subsequently being offered. However, students were aware of constraints which influenced the effectiveness of particularly written communication. Improvements were highlighted, such as in 2004-05 students received more enrolment information through The Small Print and the joint ULSU and University Student Handbook. Students, including those at partner institutions, were positive about programme and module information and the website, and the international students had experienced appropriate information being communicated to them, either by personal contact in their home countries or through the website.

199 The structural changes to the undergraduate curriculum, that the SED reported was felt by students to be rushed and poorly communicated. In two DAT areas, students were disappointed at the loss of modules and the lack of consultation. The University accepted that students had perceived a lack of communication, although senior management suggested that there might have been other reasons for their views. The audit team concluded that while, in some instances, communication with students concerned about reduction in modular choice could have been made more clear and timely, the University had overall sought to monitor changes openly and responsively as far as it was possible in circumstances constrained by falling student demand and shortages in staff.

200 Information on assessment procedures and complaints is publicised to students through the Student Web and student handbooks. The SWS, while noting that knowledge of academic offences could vary considerably across programmes, stated that in

general students were satisfied that there was clear communication by the University of assessment procedures. Evidence gathered by the team from discipline-level inquiries confirmed that students were clearly aware of plagiarism, its definition and consequences.

201 The audit team found that the information provided to students, whether electronic or in hard copy, is generally accurate and appropriate to support their studies. However, the team noted some inconsistency between the assessment regulations as presented in Small Print when compared to the Academic Regulations. Although the differences might be regarded as minor and, as the University suggested simply a function of a preferred simpler format in the former case, the team believes that the possibility of confusion, particularly concerning requirements for good honours classification, is genuine and should be guarded against by closer harmonisation.

Reliability, accuracy and completeness of published information

202 The University is aware of its obligations under HEFCE's document, *Information on quality and standards in higher education: Final guidance* (HEFCE 03/51) to provide institutional and programme/subject level information for publication. It has already fully complied with the requirements regarding institutional information, by providing its Teaching and Learning Strategy, a summary of its links with relevant employers, and links to relevant reports on the QAA website. Additional information will be added to the Higher Education Research Opportunities in the UK website in May 2005 and available for the University's external and internal audience.

203 The audit team was informed that, at programme level, the University intends to provide summaries of external examiners' reports and Departmental Review reports by a date in May 2005. It is also completing the development of an electronic records management database, viewed by a web interface and linked to the Teaching Quality Information site. Summaries of external examiners' reports will be based on the

'Executive Summary of External Examiner Findings' which forms the final section of the template for external examiners' reports. The team noted the University's view that the wording of this part of the template may require amendment in order to remove a perceived ambiguity in respect of the 'Statement on Standards', and would encourage the University to resolve this issue speedily.

204 The audit team concluded on the basis of the evidence available that the University had made steady and sufficient progress towards the requirements of HEFCE 03/51 and has in place sufficiently rigorous and robust procedures to ensure that it will be able to comply with these requirements.

Findings

Findings

205 An institutional audit of the University of Luton (the University) was undertaken during the week 11 to 15 April 2005. The purpose of the audit was to provide public information on the quality of the University's programmes of study and on the discharge of its responsibility as a UK degree-awarding body. As part of the audit process, according to protocols agreed with the Higher Education Funding Council for England (HEFCE), the Standing Conference of Principals and Universities UK, four discipline audit trails (DATs) were selected for scrutiny. This section of the report summarises the findings of the audit. It concludes by identifying features of good practice that emerged from the audit, and recommendations to the University for enhancing current practice.

The effectiveness of institutional procedures for assuring the quality of programmes

The quality assurance framework

206 The University's framework for quality and standards has, since the last audit, been shaped by a number of strategic imperatives including greater economy, a focus on student recruitment and retention, teaching quality enhancement and adjustments to the academic portfolio. A prime example of the changes that have taken place is the merging of two separate committees to form the Teaching Quality and Standards Committee (TQSC) with a significant emphasis on enhancement. The self-evaluation document (SED) explained that the committee structure is characterised by a relatively small number of committees with short lines of accountability to Academic Board and one where central academic executive bodies play a strong leadership role. The Centre for Quality Assurance and Enhancement (CQAE) has a central and multiplicitous role in the quality and standards framework including responsibility for quality assurance and management, teaching quality enhancement, the development of undergraduate and postgraduate modular schemes and what appears to be a key advisory regulatory and

executive role in programme validation. The Dean of Quality Assurance is also the chair of TQSC and, in the view of the audit team, this dual role has the potential for confusion and possible conflict of interest.

207 A challenge for the audit team during the audit visit was tracking issues through the committee structure. This was predominantly due to some incomplete, inaccurate and missing documentation. Therefore the team considers it advisable that the University develop consistent, accurate and coherent reporting protocols so that senior committees of the University are able to exercise their responsibility fully.

Programme approval

208 The University's processes for approval, monitoring and review have evolved in response to changing internal needs and external expectations. The validation system (used synonymously with approval) has, according to the SED, been recently modified. The University's Quality Assurance Handbook summarises the new procedure as one which 'dispenses with the adversarial model of validation in favour of a collaborative approach designed to facilitate good course design and academic ownership on the part of the staff team; draws on the concept of academic risk to determine the procedures appropriate to individual proposals; and reaffirms the important place in the quality assurance system of annual programme monitoring and subject review as occasions when staff teams are accountable to the academic community for enhancing the quality and standards of the programmes for which they are responsible'. The revised process, implemented during 2003-04, is a more discretionary approach based on proportionality, depending on the nature of the programme and the experience of the department. The team found the policy documentation about the new system to be complex and difficult to follow, noting that communication of the requirements of the new system might be also difficult.

209 The audit team had significant concerns about the approval process, the speed with which it had been introduced, the apparent lack of meaningful involvement of collaborative

partners and the role of the CQAE in determining what processes were required and when a programme proposal moved directly from the development stage to validated status, without passing through any form of further scrutiny or approval process. This results in a blurring of the distinction between development and validation, and between executive decision-making and an independent scrutiny of quality and standards. The team found examples, including 30 Foundation Degrees (FDs), of where the approval process was undertaken in a very compressed timescale and with little apparent input from employers. The team also noted instances where requirements arising from the approval event were not completed, such as mapping the proposed programme against relevant external benchmark statements for FDs, prior to commencement of the programme. The University argued that external involvement was not necessary where FDs were conversions of existing HNDs as, in areas where the University lacked experience, external peers had been involved, predominantly as the awards are developed, although it had not always been possible to gain full input. The team considered that the role of a member of CQAE in the planning meeting which may effectively lead directly to validation, did not provide sufficient external input and therefore was not in line with the University's own stated principles on external involvement, nor with the section of the *Code of practice for the assurance of academic quality and standards in higher education (Code of practice)*, published by QAA on approvals. In the particular example of the validation of FDs, the practice did not appear to be in line with the *Foundation Degree qualification benchmark*. However, the concerns of the team go more broadly than these specific circumstances; it considers that the design of the new approval and validation system is flawed. Overall the team noted that the speed at which the new system had been introduced, the large volume of approvals, the pressures and limited resources within some faculty subject teams and centrally in CQAE, and the truncated timescales involved, had created in 2004 a situation in which it might have been difficult to adhere fully to the objectives and requirements of

the new approval system or indeed those expected more widely within the sector. Having reviewed carefully all the evidence available to it, the team believes that standards may have been put at risk during this process.

Annual monitoring

210 According to the University, annual monitoring has become an even more important part of the quality assurance framework, particularly in light of the changes to the validation process and the potential for local divergence as a consequence of the move to more linear programmes. The revised annual monitoring process has greater involvement by the centre predominantly through senior CQAE staff's involvement in programme monitoring meetings, but also has different annual monitoring cycles for undergraduate field and taught postgraduate programmes, uses a module review form by staff on a discretionary basis and the grouping of reports presented to Faculty Teaching Quality and Standards Committee (FTQSC) to promote discussion.

211 The audit team considered that it might have been too early in the transitional period between the old and new more linear module scheme for the full impact of the revised annual monitoring process to be clear. However, monitoring still seemed to be focused at field level and it was not clear how the process worked at the level of the individual programme. The team was concerned that the grouping of reports for consideration at FTQSC might cause individual programmes to be lost and not monitored fully.

Periodic review

212 The system of periodic review was introduced in 1998-99 and the first cycle of reviews completed at the end of 2003-04 was focused at departmental level. Academic Board has decided that the second cycle will have a subject focus and will not include a review of support services as these are considered elsewhere. However, the second cycle of reviews does not commence until 2005-06 and therefore there was no system of periodic review operating at the time of the audit, indeed the DATs

highlighted a number of programmes that did not appear to have been subject to formal internal review for some significant time. The University noted that these programmes would have been reviewed by other mechanisms including programme approval.

213 The audit team saw evidence that the University combined different quality assurance functions in one event and it was not always possible to identify specific programmes within these reviews. Thus the team is not clear how the University can be assured that individual programmes are being quality assured appropriately and follow-up actions undertaken.

Feedback from students, graduates and employers

214 The University employs a range of mechanisms to obtain feedback from students on the quality of its programmes. The mechanisms include the Student Perception of Module (SPOM) forms, the Student Experience Questionnaire (SEQ) and representation on University committees. The University is aware of the relatively low response rate for SPOM forms but notes that they provide a useful source of longitudinal data into student satisfaction at individual module level; a review of the SPOM is to be undertaken. However, the audit team noted that the issue of low participation rates was raised by the previous audit team and would recommend the University to identify means of encouraging higher student participation particularly at the programme level. The SEQ was introduced corporately in 2003-04, however, data was not available at the time of the audit. Student feedback is discussed at University committees, representatives' views are listened to and action is taken particularly at the local level. Feedback from graduates is of an informal nature at present.

215 Feedback from employers is gained through a variety of mechanisms. Of particular note is the Employer Liaison Fellow (ELF) scheme where academics are allocated to a particular business sector and manage the relationships with employers. The audit team considered that employer feedback is generally sufficient although concern remains about the degree of employer input into the development of FDs.

Distance-learning and collaborative programmes

216 The University has prioritised, as part of its mission and strategic plan, a significant development of collaborative provision. This is taking place with a range of partners, primarily local further education colleges but also private, specialist providers in the UK and, through articulation arrangements, with providers in China and the South Asian subcontinent. The University has validated courses at a private College in Oman giving it associate college status. There is also an innovative, electronically based distance-learning MBA (referred to by the University as the 'eMBA') intended to be delivered overseas across a number of sites. A major new partnership with two other universities and the relevant Strategic Health Authority has been created to establish a postgraduate medical school. Distributed provision has increased since the last audit and, based on the information available to the audit team at the time of the audit, appears to be set to increase further both in scale and complexity.

217 The SED explained that the University has sought to rationalise the range of relationships with partner colleges into four categories to reflect changing strategic and operational realities favouring a validation model. The four categories are FDs, validated programmes (including associate college status), articulation arrangements, and the emerging collaborative provision category (provided by the network of international institutional relationships being developed for the delivery of the eMBA). In the view of the audit team these do not capture adequately or accurately the range and nature of existing arrangements and are likely to be outstripped by the speed and scale of the expanding collaborative provision.

218 The audit team's concerns regarding the approval of FDs are noted in paragraph 209 above. However, the team also has concerns about the appropriateness of approval processes for overseas collaboration, particularly in relation to the eMBA; a programme initially validated on the basis that the University would itself directly set and mark all assessment with the partner

providing facilities and support. The team heard that the sole partner running the eMBA carries out substantial aspects of the academic delivery, including first marking; however, the team could not establish on what grounds the partner had been approved to do so. No evidence was seen by the team of a formal approval event being undertaken for the eMBA, other than documentation relating to an initial approval of local staff profiles and a brief confirmatory evaluation of information technology facilities. This would seem to indicate that either no formal approval event took place or that it did so but in an unrecorded manner and hence unknown to TQSC where formal responsibility, on behalf of Academic Board, lies. The team was aware of approval visits to partners potentially offering this award.

219 The audit team recognises that the University has a clear understanding of the significant implications of increasing its distributed provision particularly in relation to learning resources and support. However, while the team saw evidence that University quality assurance processes, such as the external examiner system, student representation and the use of gap analysis techniques in considering amendments to the *Code of practice*, published by QAA, were operating appropriately in the partner colleges, they were less clear about how the University maintains an overview of this expanding provision.

The effectiveness of institutional procedures for securing the standards of awards

220 The University considers its external examiners to be the guardians of the standards of its awards. The University's Quality Assurance Handbook sets out clear and detailed processes for the nomination and appointment of external examiners, the preparation of annual reports by them, and their role in collaborative provision, as well as helpful guidance for external examiners concerning their role in the assessment process. The audit team found that the annual reviews of external examiners' reports are thoughtful and carefully prepared summaries of key points, and

provide a suitable basis for the action plans which are derived from them.

221 The audit team considered that in general the University's arrangements for external examining in respect of securing the standards of the University's awards are appropriate, operate as intended, and are suitably aligned with the precepts of the *Code of practice*, Section 4: *External examining*.

222 Throughout the DATs the audit team saw evidence that the University's strategy for Teaching, Learning and Assessment is being appropriately followed in respect of the design of student assessment tasks and of the nature and quality of feedback, and that students are attaining standards appropriate to their awards.

223 While accepting that there is scope for improvement in the timeliness of the production of statistical data concerning student progression and achievement as well as in its usage, the University now places considerable faith in the capacity of student record system to provide good management information on student progression. The audit team commended the valuable analyses of trends in student achievement contained in the annual reports of the Undergraduate and Postgraduate Modular Schemes. However, the team would encourage the University to make better use of its data relating to the progression of students from differing backgrounds and with differing qualifications on entry to provide evidence that it is fulfilling its mission.

224 In relation to student progression it is feasible for undergraduate students to progress to the next academic level having completed successfully six out of eight modules. Progression is automatic, except where Professional Statutory Body requirements had not been met, and students would not be required to retrieve the failed modules but would be awarded general academic credit. Under these circumstances a student whose performance was not consistent with the level descriptors or learning outcomes might nevertheless progress to the next level of the programme. Consequently, the team believes it

desirable for the University to consider whether its student progression rules could encourage students who are not yet competent to progress to the next level and to continue to monitor student performance in this context.

The effectiveness of institutional procedures for supporting learning

225 A range of innovations for supporting learning has been developed in order to enhance the corporate strategy of student retention. These built on the strengths identified in QAA subject review reports and in response to the 2002 audit report recommendation. The innovations include the Corporate Academic Advisory Service (CAAS), the Student Attainment Review (STAR) Boards, Personal, Professional and Academic Development (PPAD) modules and the Extenuating Circumstances Board. The audit team considered that these were well received by staff and students, provided effective support for the diverse student body, and in the case of the CAAS, STAR Boards and PPAD modules are examples of good practice. Indeed the successful nature of the PPAD modules has been recognised through the recent success in a Centre for Excellence in Teaching and Learning bid. From the evidence considered, it is apparent that the University, staff and students positively rate library provision particularly the use of Discipline Support Plans, for library liaison with academics and departments, and the informal Library Liaison Group attended by the University and Partner Colleges. The team also considers these two elements as examples of good practice.

226 The central access to learning support and advice, provided by the University and University of Luton Students' Union advice centre, is in the Student Centre and information on the student web and virtual learning environment facilitate, easy access to specialist student services. Learning Resources brings a range of services together, and development is planned against best practice in the sector.

227 The University does not operate a formal personal tutor system although staff make themselves available during advertised times. There is a system of departmental academic

advice and guidance which was welcomed by students met by the audit team, particularly the positive relationships with tutors. The students' written submission (SWS) noted a more patchy experience, however, with some students dissatisfied with the availability of staff, and the timeliness of feedback on assessed work. The University is not convinced that the arrangements for programme-based advice are sufficiently systematic or proactive and discussions about the re-instatement of a personal tutorial system are underway. The team formed the view that there were strong support systems at an institutional level and satisfactory arrangements at departmental level.

228 The University provides staff development at a corporate level and departmental level in accordance with the Staff Development Policy. Corporate training and development activities centre on ensuring staff are equipped to deliver the academic plan for FDs, an increase in international students and a proportional rise in postgraduate students, enhanced student care, management development and a diversity action plan. The annual academic staff development programme provides a range of courses that are available to University staff and those in partner colleges. The audit team considers that the staff development opportunities available were consistent with the description in the SED and appropriate to the needs of the institution and its collaborative partners.

Outcomes of discipline audit trails

Computing

229 Programme specifications provide clear descriptions of the aims, the intended learning outcomes and the curricula of each programme which the audit team found to be appropriately aligned with the University's Level M descriptors. The most recent Annual Monitoring Report (AMR) showed evidence of a thoughtful and detailed analysis of a wide variety of aspects of the programme and its delivery.

230 The report of the validation event relating to the MSc Computer and Internet Applications and the MSc Computer Science showed thorough consideration of these programmes

and reflected the written input of an appropriate external member.

231 In considering examples of students' assessed work, the audit team found evidence of tasks being set at appropriate levels and of work of very high calibre by some students. Despite the recent considerable increase in student numbers, the team found that the availability of resources was regarded by students as highly satisfactory.

232 The audit team is satisfied that the standard of student achievement is appropriate to the titles of the awards and that the quality of learning opportunities is suitable for the programmes of study being considered.

Graphic design

233 From its study of students' assessed work and from its discussions with students and staff the audit team formed the view that the standard of student achievement in the programmes was appropriate to the title of the award and its location in *The framework for higher education qualifications in England, Wales and Northern Ireland* (FHEQ). Programme specifications describe the key aspects of the programmes, make reference to subject benchmark statements and are found to be useful by staff. However, the team saw no evidence of consideration of the FHEQ via comparative level descriptors through the approval process. The assessment strategy for the programmes articulates effectively with institutional policies and is well suited to the discipline.

234 During the visit students were extremely complementary about the teaching staff and communication with them was cited as a major strength of the programmes. Both staff and students reported very positively on the way in which University policy for PPAD had been implemented within art and design. The audit team concluded that the quality of learning opportunities available to students was suitable for programmes of study leading to awards in graphic design.

Languages and communication

235 The programme specifications for the undergraduate programme BA English Language Studies and the postgraduate MA in Applied Linguistics (Teaching English as a Foreign Language (TEFL)) and MA Intercultural Communication gave clear educational aims and objectives, learning outcomes and details of the curricula which were appropriate to the level of study. However, it would be useful for the two MA programmes to engage with Level M descriptors. In viewing students' assessed work, auditors noted that tasks were set at appropriate levels and standards of achievement were appropriate to the titles of the awards. This was confirmed by external examiners in their reports.

236 A periodic review of the individual programmes has not taken place. The audit team was given a document that stated that CQAE considered the 'monitoring of incremental curriculum development through the appropriate Faculty Academic Standards Committee (now FTQSC) is a sufficiently robust quality assurance mechanism for extant programmes.' The MA in Applied Linguistics (TEFL) was validated in 1996 and though staff contributing to the programme teach on other programmes subject to more recent validation processes, the audit team concluded that the system resulted in a lack of scrutiny of the design of an entire programme.

237 Students were positive about the support they received from tutors and the centrally provided student support centres. This was mentioned particularly by overseas and European Union students. The newly upgraded Language Centre was highly praised, as was the library's late opening hours. The audit team concluded that the standard of student achievement in the programmes covered by the DAT is appropriate to the title of the award and that the quality of the learning opportunities to students was suitable for the programmes and awards.

Sports science

238 The programme specification for the Sport and Exercise Science generic framework, including the Coaching Science and Exercise

Physiology pathways, embraces relevant subject benchmark statements but there was no reference to the University's level descriptors.

239 The most recent AMR was comprehensive, analytical and self reflective and included responses to external examiners reports and action plans, identifying clearly areas of responsibility at the corporate or local level. The audit team saw evidence of issues being addressed at the local level.

240 The audit team confirmed that a wide variety of assessment strategies are being used and external examiners considered the assessments to be appropriate and standards comparable to other institutions. From the student work viewed the team considers that the standard of student achievement is appropriate to the title of the awards and their location within the FHEQ.

241 In spite of staffing losses the staff team had worked effectively together to ensure that the quality of student experience, within the resource limitations, had been sustained. The audit team confirmed that the quality of learning opportunities was suitable for the programmes of study and awards.

The use made by the institution of the Academic Infrastructure

242 The University considers that its provision is aligned with the FHEQ, and that its procedures for programme approval are sufficient to ensure that this is the case. The audit team was informed that the University uses comparative level descriptors to ensure that programmes are aligned with the FHEQ. While these descriptors provide useful guidelines for setting expected levels of student achievement at Levels 1, 2, 3 and M, and are in general appropriately aligned with the precepts of the FHEQ, they are not included in the programme specifications.

243 The template for programme specifications includes provision for the identification of the subject benchmark statement(s) which are relevant to the programme, and the University requires Field Boards to ensure that each

programme is consistent with relevant subject benchmark statement(s). Although the audit team found that, at the time of the audit visit, teaching staff of the University were strongly aware of the existence and purpose of subject benchmark statements, it found also some weaknesses in the University's processes for demonstrating the alignment of individual programmes with subject benchmarks.

244 The University considers that the precepts of the *Code of practice* are embedded in its policies and regulations as expressed in its Academic Regulations, in the Quality Assurance Handbook and elsewhere. With the exception of Section 7 of the *Code*, relating to programme approval, monitoring and review, the audit team found that this is indeed the case. The team also formed the view that the University has established appropriate and timely procedures for considering how to respond to revisions to the *Code*.

The utility of the SED as an illustration of the institution's capacity to reflect upon its own strengths and limitations, and to act on these to enhance quality and standards

245 The SED provided an overview of the framework by which the University manages the quality of its provision and the standard of its awards. The audit team appreciated the honesty and powerful clarity of the SED in setting out this strategic context and the imperatives and purpose behind changes in the quality strategy and framework. The document described accurately and in the main evaluated University structures, roles, processes, initiatives, services and organisational changes.

Commentary on the institution's intentions for the enhancement of quality and standards

246 The SED explained that the University is placing greater emphasis on quality enhancement and expects that quality assurance systems will contribute towards it. Priority is being given to activities which support student retention and prominence to blended learning,

student employability, assessment, the professional teaching environment, internationalising the curriculum and configuration of the estate. The audit team recognised the potential value of initiatives to enhance the quality of student learning and support. The team also understood from staff that with so many initiatives underway, there are some ambiguity in the understanding of the difference between the enhancement agenda and the expansion/renewal of the programme portfolio that might mean the University losing some opportunities for enhancement in the more established sense of academic quality of the student learning experience.

Reliability of information

247 The University is making progress in providing information as recommended in HEFCE's document, *Information on quality and standards in higher education: Final guidance* (HEFCE 03/51). It has already published institutional information and will be presenting summaries of external examiner reports and Departmental Review reports in May 2005. It is also completing the development of an electronic records management database, viewed by a web interface and linked to the Teaching Quality Information site.

248 The audit team found that information available to students was accurate and useful. National and international students were positive about the information provided regarding programmes of study. Although there was some disappointment at changes to programmes after prospectuses were published, it was recognised that this was unavoidable. The process for assuring the accuracy of prospectus details was outlined to the team. Marketing and Communications receive information for the prospectuses from the Planning Unit which updates the definitive list of programmes. The prospectuses cross-refer applicants to the website as a current source of information. However, the management of the content of the website is delegated to departments.

249 The SWS drew attention to the way that

module cancellations were communicated to students which were viewed negatively by some. This was reiterated at meetings with students with regard to the structural changes to the University's curriculum. Moreover, although there are useful mechanisms to inform students, including The Small Print and the Student Web, the audit team found that inconsistencies between the assessment regulations as presented in Small Print when compared to the Academic Regulations, although considered minor by the University, could cause significant confusion for students and should be guarded against by closer harmonisation.

250 The audit team saw a range of University sources of information including the website and printed materials that provide students and the public with information which the team found to be reliable and accurate. The team was satisfied that the University is addressing the production of information as recommended by HEFCE 03/51. It considered that the published information about the quality of its programmes and the standards of its awards was found to be reliable.

Features of good practice

251 The following features of good practice were noted:

- i the development of ELFs (paragraph 92)
- ii the use of Discipline Support Plans as a useful tool for library liaison with academic departments (paragraph 112)
- iii the use of the Library Liaison Group as a forum for liaison between the University library and libraries in the partner colleges (paragraph 112)
- iv the promising work of the CAAS in terms of student support, its contribution to student retention and its development of a central system for extenuating circumstances treatment (paragraph 119)
- v the introduction of STAR Boards as a means of supporting students at risk (paragraph 121)

- vi the PPAD and the integration of career management into the curriculum (paragraph 122).

Recommendations for action

252 Recommendations for essential action:

- i that, the method of programme approval ensures that decisions are taken in a timely manner, with clear outcomes, made independently of those responsible for programme management and development, and that they take account of any necessary specialist advice (paragraph 52).

253 Recommendations for action that is advisable:

- ii develop consistent, accurate and coherent reporting protocols so that senior committees of the University are able to exercise their responsibility fully (paragraphs 50, 80)
- iii implement the new periodic review procedures without delay and to ensure that the reviews provide systematic coverage of all programmes (paragraph 59)
- iv develop clear formal University-level procedures for the approval of eMBA overseas partners where assessment will be undertaken by the partner (paragraph 141).

254 Recommendations for action that is desirable:

- v reconsider the combination of roles in persons and committees in relation to the operation and oversight of quality assurance and quality enhancement to guard against possible conflicts of interest (paragraph 35)
- vi ensure that programme approval procedures are clearly described and communicated to those who are involved with them, so that they are implemented consistently across the University (paragraph 43)
- vii consider, especially in the light of a move to more linear provision, whether annual course monitoring should be more focused on individual programmes (paragraph 56)

- viii consider whether its student progression rules are fully compatible with the achievement of learning outcomes and to continue to monitor student performance in this context (paragraph 73)

- ix improve student participation in programme evaluation procedures to enhance local academic practice (paragraph 94).

Appendix

The University of Luton's response to the audit report

The University welcomes the recognition of several areas of good practice, particularly as these further reinforce our reputation for excellence in student support and employability. We are especially pleased with the commendation for our Personal, Professional & Academic Development which fully integrates career management into the curriculum. This work has also been recognised by the award of a Centre of Excellence in Teaching and Learning.

We are surprised and disappointed by the outcome, especially since many of the criticisms contradict Teaching Quality Assessments and Developmental Engagements by other QAA teams, including a Developmental Engagement and a Major Review at the same time as the Audit. The Major Review and other events have either praised our method of programme approval, or at least not found fault with them. We were particularly disappointed that the Audit preferred oral over documentary evidence.

We have already commenced a rigorous review of all our processes, procedures and organisation of academic quality. We are determined to eliminate any confusion regarding our commitment to the sound management of the quality of our academic programmes and academic standards of our awards.

Academic Board will be asked to approve new proposals which clearly demonstrate that the Centre for Quality Assurance and Enhancement is not subject to any perceived 'conflict of interest'. The Deputy Vice Chancellor (Academic) will chair the Teaching Quality and Standards Committee and the Dean of Quality Assurance will report to the Registrar in future. Academic Board will be asked to review whether 'quality' should be separated from the 'enhancement' agenda as suggested in the report. We are clear that enhancing the quality of student learning and support is the key objective. We do not agree with the Audit's suggestion that it is closely identified with expansion of the portfolio, which the University prefers to call the 'development agenda'. Academic Board will want to study successful models from other universities.

We will thoroughly review our processes for approval and monitoring. We will give emphasis to effective documentation of the approvals process and assure ourselves that all approvals are timely, add value to the student experience, continue to benefit from external advice, have clear outcomes and any necessary follow up action is completed to deadline. To achieve this the management of both approval and monitoring processes will be placed in the newly-created Registry as part of the administrative function of the University. The University will use its established system of process review to ensure that there is clarity over the periodic review system and annual monitoring and that the former is systematic and efficient.

We have already taken steps to ensure that the eMBA is operated to specification and is monitored and documented. We have also developed an action plan to improve student participation in evaluation procedures. We will continue to monitor student progression and performance; initial outcomes suggest that recent changes to student progression rules are consistent with both the achievement of learning outcomes and practice in other UK universities.

